F	REISSUED	a Employee's socia	l security number			Safe	, Accurate,	e 🖸	A SHIP	Visit the	IRS Website	
S	TATEMENT	75	8-06-5627	OMB N	o. 1545-	0008 FAS	T! Use	U	≁file >	at www.	irs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation			2 Federal income tax withheld			
83-7959202						235410.96			44226.09			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld			
Coleman, Odom and Evans Ltd					187438.24				14339.03			
0534 Steven Forest Apt. 991 Williamsview WY 94856-5955					5 Medicare wages and tips				6 Medicare tax withheld			
					247133.53				7166.87			
WIIIIamsview WI 94030-3933					7 Social security tips				8 Allocated tips			
					187438.24				247133.53			
d Control number					9 Advance EIC payment 10 Dependent care benefits				enefits			
9506035									141			
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12			
						139			6040			
	Matthew Torres 079 Bradley Mews Apt. 436				13 Statutory Retirement Third-party employee plan sick pay				12b	1		
					X X SICK PAY				D	D 640		
	Colemanchester RI 47017-3844					14 Other (see enclosed Notice to Employee)			12c	i i		
COTEMATICITES CET IXI 47017 3044									P	602		
								12d				
									_	1 20		
								ļ	D	132		
f Emplo	eyee's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wage	s tins etc	19 1	ocal income ta	Υ	20 Locality name	
OH			117038.2	8167.77		J		1	28370.82		1	
OH	800-08-315 117038.2 8167.77		010/.//		210300	. JI	20	310.82		Montes Squares		
PA	517-82	517-82-421 115521.67 8942.21		8942.21	172963.98 3		36	240.7	Arnold Shoal			

Wage and Tax

Form W-2 Statement

5070

Department of the Treasury--Internal Revenue Service

Copy B--To Be Filed with Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

R	REISSUED a Employee's social security number				This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if						
	TATEMENT 758-06-5627 OMB No. 1545-0008 to life a tax return, a negligence penalty of other sanction may be imposed on your this income is taxable and you fail to report it.								, ,		
b Employ	b Employer identification number					1 Wages, tips, other compensation			Federal income tax withheld		
83-7959202					235410.96			44226.09			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Coleman, Odom and Evans Ltd					187438.24			14339.03			
	0534 Steven Forest Apt. 991					5 Medicare wages and tips			6 Medicare tax withheld		
Williamsview WY 94856-5955					247133.53			7166.87			
WIIIIamsview Wi 94656-5955				7 Social security tips			8 Allocated tips				
					187438.24			247133.53			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
9506035								141			
e Emplo	yee's first name and initial	Last name)		11 Nonqualified plans			12a See instructions for box 12			
:	Matthew Torres 079 Bradley Mews Apt. 436				139 13 Statutory Retirement Third-party			60 4 0			
					employee plan sick pay			D 640			
Colemanchester RI 47017-3844					14 Other (see enclosed Notice to Employee)			12c			
								P 602			
							F	12d	l		
									D 132		
	yee's address and ZIP cod	le									
15 State	Employer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	ocal income tax		20 Locality name	
ОН	800-08	3-315	117038.2	8167.77		216386.91	28	370.82		Montes Squares	
PA	517-82	2-421	115521.67	8942.21		172963.98	36	240.7		Arnold Shoal	

Wage and Tax

Form W-2 **Statement**Copy C For EMPLOYEE'S RECORDS.
(See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

