REISSUED	REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website		
STATEMEN	T 4:	17-80-8961	OMB N	o. 1545-0	008 FAST! Use		<b>Tile</b>	at www.irs	s.gov/efile.	
b Employer identification number				1 Wages, tips, other compensation			2 Federal income tax withheld			
27-3141807				74721.86			26856.93			
c Employer's name, add	ess, and ZIP code			3 Social security wages			4 Social security tax withheld			
Delgado-Mueller and Sons				97032.5			7422.99			
49179 Cantrell Drive Apt. 787				5 Medicare wages and tips			6 Medicare tax withheld			
Robertshire PA 29510-5732				64002.93			1856.08			
RODELCSHILE PA 29310-3732				7 Social security tips			8 Allocated tips			
				97032.5			64002.93			
d Control number				9 Advance EIC payment			10 Dependent care benefits			
9525823							108			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Maria Small				218			1800			
				13 Statutory Retirement Third-party employee plan sick pay			12b	i		
6890 Khan Light				Cinp	loyee plan	SICK Pay		637		
South Michael VT 67835-5015				14 Other (see enclosed Notice to Employee)			12c	1		
							G	715		
			12d							
								976		
f Employee's address a	nd 7ID code							770		
	state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc	c. 19	Local income tax	(	20 Locality name	
IL 30	5-43-779	40351.74	2762.08		89486.24		809.23		Brown Turnpike	
WY 50	1-62-222	39213.02	2687.69		77461.09	14	4556.44		Patricia Green	

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

Form W-2 Statement

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.

F	REISSUED	a Employee's soci	•		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	4:	17-80-8961	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.					
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld			
27-3141807					74721.86			26856.93		
<b>c</b> Emplo	c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld		
Delgado-Mueller and Sons				97032.5			7422.99			
49179 Cantrell Drive Apt. 787				5 Medicare wages and tips			6 Medicare tax withheld			
	Robertshire PA 29510-5732				64002.93			1856.08		
RODERTSHIPE PA 29510-5732				7 Social security tips			8 Allocated tips			
				97032.5			64002.93			
d Contro	d Control number				9 Advance EIC payment			10 Dependent care benefits		
	9525823							108		
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
Maria Small				218  13 Statutory Retirement Third-party employee plan sick pay			1800			
6890 Khan Light								637		
South Michael VT 67835-5015				14 Other (see enclosed Notice to Employee)			12c			
							G	715		
						12d				
							976			
f Employee's address and ZIP code  15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax				18 Local wages, tips, etc. 19			D Local income tax 20 Locality name			
IL.					9			3809.23		,
	305-43	)	40351.74	2762.08		89486.24	00	09.23		Brown Turnpike
WY	501-62	2-222	39213.02	2687.69		77461.09	14	556.44		Patricia Green

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

