REISS	EISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website at www.irs.gov/efile						ite		
STATE	MENT	74	17-58-4283	OMB N	lo. 1545-0	008 FAS	T! Use	G~I	16	at www.i	rs.gov/efile	١.	
b Employer iden	ntification number				1	1 Wages, tips, other compensation			2 Federal income tax withheld				
37-	5942302					203348.29				23067.61			
c Employer's na	me, address, and 2	ZIP code			3	3 Social security wages				4 Social security tax withheld			
Armstrong PLC Ltd						235650.22				18027.24			
724 Kelsey Drive Lake Michael CO 13815-5387					5 Medicare wages and tips				6 Medicare tax withheld				
					214093.26				6208.7				
					7 Social security tips				8 Allocated tips				
						235650.22			214093.26				
d Control number					9 Advance EIC payment			10	10 Dependent care benefits				
207	6920								165				
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12					
					284				н 1433				
Asn	Ashley Salazar					13 Statutory Retirement Third-party employee plan sick pay							
198 Dickerson Terrace Suite 632						The plant of the p				G 174			
East Richard FL 58010-7326						14 Other (see enclosed Notice to Employee)				1			
										979			
								12d	12d				
									D	303			
f Employee's ac	ddress and ZIP cod	е											
15 State Em	ployer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wage	es, tips, etc.	19 Local in	come tax		20 Locality	name	
CA	082-22	-967	102876.07	9518.13		248831	.1	28877	1.3		Young	Cliff	
NV	355-22	-333	102486.45	7553.83		210537	.8	24636	5.69		Roberts	Highway	

Wage and Tax

5070 **Statement** Form W-2

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.

F	REISSUED	a Employee's socia	al security number	This information is being furnished to the Internal Revenue Service. If you are required								
S	TATEMENT	74	17-58-4283	OMB N	OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.							
b Emplo	oyer identification number	•		•	1 V	Vages, tips, other compensation		2 Federal income tax withheld				
37-5942302						203348.29		23067.61				
c Emplo	oyer's name, address, and	ZIP code			3 Social security wages			4 Social security tax withheld				
Armstrong PLC Ltd					235650.22			18027.24				
724 Kelsey Drive					5 N	Medicare wages and tips		6 Medicare tax withheld				
_					214093.26		6208.7					
	Lake Michael CO 13815-5387				7 S	ocial security tips		8 Allocated tips				
						235650.22		214093.26				
d Control number				9 Advance EIC payment			10 Dependent care benefits					
2076920							165					
e Emplo	oyee's first name and initial	Last name	9		11 Nonqualified plans			12a See instructions for box 12				
Ashley Salazar				13 Statu	284 tory Retirement Third-party		H 1433					
198 Dickerson Terrace Suite 632 East Richard FL 58010-7326					emple	x		G 174				
					14 0	Other (see enclosed Notice to Employ	ee)	12c				
								E 979				
								12d				
								D	D 303			
f Employee's address and ZIP code					T				T			
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		3.7,7,7		cal income tax	20 Locality			
CA	082-22	2-967	102876.07	9518.13	248831.1 2		288	28877.3		Young	Cliff	
NV	355-22	2-333	102486.45	7553.83		210537.8	246	36.69		Roberts	Highway	

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

