REISSUED a Employee's social security	•		Safe, Accurate, Visit the IRS V								
STATEMENT 131-83	3-2221	OMB No	. 1545-00	008 FAST! U	se		le	at www.ir	s.gov/efile.		
b Employer identification number			1 Wages, tips, other compensation			2	Federal	income tax	withheld		
55-7536698				113986.87				23316.84			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
West, Ramirez and Taylor Ltd			130186.03			9	9959.23				
31448 Rachel Loaf Apt. 813 Lake Patricialand RI 11881-1491			5 Medicare wages and tips			6					
			80470.24				2333.64				
Lake Patricialand Ri 11661-1491				7 Social security tips			8 Allocated tips				
				130186.03			80470.24				
d Control number			9 A	dvance EIC payment		10	•	ent care be	nefits		
2834638								257			
e Employee's first name and initial Last name			11 Nonqualified plans			12a	12a See instructions for box 12				
William Fernandez			132				D 5357				
			13 Statutory Retirement Third-party employee plan sick pay			12b					
086 Paige Isle			empi	byee plan	X		D	347			
New Sheryl NM 661	127-6709		14 (Other (see enclosed Not	ice to Employe	e) 12c	i i				
New Sheryr Am 00127 0703							E	952			
						12d					
								132			
f Employee's address and ZIP code								132			
	te wages, tips, etc. 17	7 State income tax		18 Local wages, tips,	etc.	19 Local in	come tax		20 Locality name		
AL 708-91-690 5624	48.05 2	931.92		120104.33		16511	.29		Joshua Viaduct		
CA 828-70-663 5850	01.53 2	2780.75		137343.74 14		L4010.74			Sandra Vista		

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.

R	REISSUED	a Employee's socia	•		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	13	31-83-2221	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.						
b Employer identification number				 Wages, tips, other compensation 			Federal income tax withheld				
55-7536698					113986.87			23316.84			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
West, Ramirez and Taylor Ltd				130186.03			9959.23				
31448 Rachel Loaf Apt. 813 Lake Patricialand RI 11881-1491				5 Medicare wages and tips 80470.24			6 Medicare tax withheld 2333.64				
											7 Social security tips
				130186.03			80470.24				
				d Control number				9 Advance EIC payment			10 Dependent care benefits
2834638								257			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
William Fernandez 086 Paige Isle New Sheryl NM 66127-6709			132			D 5357					
			13 Statutory Retirement Third-party employee plan sick pay 14 Other (see enclosed Notice to Employee)			12b					
							D	347			
						12c					
							E	952			
						ŀ	12d				
							132				
	yee's address and ZIP co			1 -							•
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.			ome tax		20 Locality name
AL	708-91	L-690	56248.05	2931.92		120104.33		16511.29			Joshua Viaduct
CA	828-70)-663	58501.53	2780.75		137343.74		4010.74			Sandra Vista

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

