F	REISSUED	a Employee's socia	•				Safe, Accurate,	Tre •	- G		Visit the	IRS Website	
S	TATEMENT	54	1-26-4799	OMB N	lo. 1545-	0008 F	AST! Use			e	at www.i	rs.gov/efile.	
b Emplo	yer identification number				1	1 Wages, tips, other compensation				Federal income tax withheld			
41-0821724						159288.82				56789.03			
c Employer's name, address, and ZIP code					3	3 Social security wages				4 Social security tax withheld			
Barnett, Cannon and Wright PLC						196758.2				15052.0			
8522 Jones Heights					5 Medicare wages and tips				6 Medicare tax withheld				
	-				170976.9				4958.33				
Brettport NV 87469-8436					7 Social security tips				8 Allocated tips				
						196758.2			170976.9				
d Control number					9	9 Advance EIC payment 10 Depend			dent care benefits				
8964595									269				
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12				
	- 11 -				107			н 9609					
	Bobby Jones					13 Statutory Retirement Third-party employee plan sick pay							
72062 Kimberly Road					X X					P 240			
	West Julie WY 54794-9092					14 Other (see enclosed Notice to Employee)			12c		•		
											993		
										12d			
										~	750		
l										G	759		
f Emplo	oyee's address and ZIP cod- Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local v	rages, tips, etc.	19	Local inc	ome tax	:	20 Locality name	
VT	304-54		79159.36	5062.37		19503			210			Julian Glens	
	304 34	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3302.37		1,500	, , , , , ,			. 00		Carrain Greiis	
DE	798-75	-947	79969.75	7733.11		13098	84.11	20	334	.26		Eric Meadows	

Wage and Tax

Form W-2 Statement

5010

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.

	EISSUED a EI	mployee's social security number 541-26-4799	OMB No	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 this income is taxable and you fail to report it.							
	yer identification number	1 V	/ages, tips, other compensation		2 Federal income tax withheld						
41-0821724					159288.82			56789.03			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Barnett, Cannon and Wright PLC					196758.2			15052.0			
8522 Jones Heights Brettport NV 87469-8436					ledicare wages and tips	6 Medicare tax withheld 4958.33					
					170976.9						
					ocial security tips	8 Allocated tips					
					196758.2	170976.9					
d Control number					9 Advance EIC payment			10 Dependent care benefits			
	8964595					269					
e Employ	yee's first name and initial	11 Nonqualified plans			12a See instructions for box 12						
Bobby Jones 72062 Kimberly Road				107 13 Statutory Retirement Third-party employee plan sick pay			H 9609				
_					14 Other (see enclosed Notice to Employee)			12c			
West Julie WY 54794-9092				,			993				
							12d	1			
					G	759					
f Employee's address and ZIP code								U			
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 I	Local income tax		20 Locality name		
VT	304-54-0	27 79159.36	5062.37		195034.24	20	210.08		Julian Glens		
DE	798-75-9	47 79969.75	7733.11		130984.11	20	334.26		Eric Meadows		

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

