RI	REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website					
ST	ATEMENT	24	1-05-6943	OMB N	o. 1545-00	008 FAST!	Use	G ~1	116	at www.i	rs.gov/efile.		
b Employer identification number					1 V	1 Wages, tips, other compensation				2 Federal income tax withheld			
4	15-7731085					67896.2	9		9395	.74			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld				
Andrews-Fields Group						66872.7				5115.76			
83770 Johnson Forks					5 Medicare wages and tips				6 Medicare tax withheld				
					56651.28				1642.89				
G	Gutierrezfurt VT 36959-4938					7 Social security tips			8 Allocated tips				
					66872.7				56651.28				
d Control number					9 Advance EIC payment			10	10 Dependent care benefits				
8	3577225									281			
e Employe	ee's first name and initial	Last name			11 N	lonqualified plans		12a	See in	structions t	or box 12		
_	_ _	_			297				8298				
Matthew Johnston 8759 Bryan Views Jessicafurt WY 78295-8241					13 Statutory Retirement Third-party								
					employee plan sick pay X 14 Other (see enclosed Notice to Employee)				D				
								ee) 12c	12c				
					, , , , , , , , , , , , , , , , , , , ,								
									H	796			
								12d		I			
									D	469			
	ee's address and ZIP cod									•			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages,	tips, etc.	19 Local i		•	20 Locality name		
HI	976-85	-809	36523.25	2673.97		86228.8	7	1138	6.43		Michael Street		
	.=								_				
KS	272-57	-646	33184.13	2389.04		59842.9		7146	. 3		Brittany Parkways		

Wage and Tax

Form W-2 **Statement**Copy B--To Be Filed with Employee's FEDERAL Tax Return

5070

Department of the Treasury--Internal Revenue Service

This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

REISSUED	a Employee's soc	ial security number			This information is being furnis						
STATEMENT	STATEMENT 241-05-6943 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 Employer identification number					1 Wages, tips, other compensation			2 Federal income tax withheld			
45-7731085					67896.29			9395.74			
c Employer's name, address, and ZIP code Andrews-Fields Group 83770 Johnson Forks Gutierrezfurt VT 36959-4938					Social security wages	Social security tax withheld 5115.76 Medicare tax withheld 1642.89					
					66872.7						
					Medicare wages and tips						
					56651.28						
					7 Social security tips			8 Allocated tips			
	66872.7			56651.28							
d Control number				9 Advance EIC payment			10 Dependent care benefits				
8577225								281			
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
Matthew Johnston 8759 Bryan Views				297 13 Statutory Retirement Third-party employee plan sick pay X X X X			8298 D 408				
Jessicafurt WY 78295-8241					14 Other (see enclosed Notice to Employee)			12c H 796			
							D	469			
5 State Employer's state ID		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19	Local income tax		20 Locality name		
HI 976-	35-809	36523.25	2673.97		86228.87	11	386.43		Michael Stree		
KS 272-	57-646	33184.13	2389.04		59842.9	71	46.3		Brittany Parkwa		

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

