F	REISSUED	a Employee's socia	l security number			Safe, Ad	curate,	e D	A SHIP	Visit the	IRS Website		
S	TATEMENT	22	28-52-2998	OMB N	o. 1545-0	008 FAST! U	Jse ***	J	≁file >	at www.i	rs.gov/efile.		
b Employer identification number					1	1 Wages, tips, other compensation			Federal income tax withheld				
55-9369896					231709.09				63970.61				
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld				
Rogers-Pham PLC						201524.28				15416.61			
07048 Johnson Orchard Apt. 711					5 Medicare wages and tips				6 Medicare tax withheld				
-					184744.36				5357.59				
Cummingsside CO 54094-7580					7 Social security tips				8 Allocated tips				
					201524.28				184744.36				
d Control number					9 Advance EIC payment 10 Dependent car				enefits				
2295995									127				
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12				
					103				G 3245				
	Brittney Rodriguez					13 Statutory Retirement Third-party employee plan sick pay			12b	1			
9151 Ward Freeway Apt. 345					employee plan sick pay				Н	244			
Davistown IL 03189-9965						14 Other (see enclosed Notice to Employee)			12c				
Davistown II 03109 9903										788			
								-	12d				
										000			
4 F		_						-		829			
15 State	oyee's address and ZIP code Employer's state ID number 16 State wages, tips, etc. 17 State income ta:		ļ	18 Local wages, tips, etc. 19		19 L	9 Local income tax		20 Locality name				
ок	746-06	-216	106647.55	7789.62		235674.61 4		46	6277.2		Wilson Viaduct		
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GA	507-32	-879	125938.33	33 6675.27		177286.6 38		38	38522.2		Christine Drive		

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 social security number This information is being furnished to the Internal Revenue Service. If you are requ								ice. If you are required		
	TATEMENT	22	28-52-2998 OMB No. 1545-0008 to file a tax returm, 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					Wages, tips, other compensation			2 Federal income tax withheld			
55-9369896					231709.09			63970.61			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Rogers-Pham PLC					201524.28			15416.61			
07048 Johnson Orchard Apt. 711 Cummingsside CO 54094-7580					5 Medicare wages and tips			6 Medicare tax withheld			
					184744.36			5357.59			
					7 Social security tips			8 Allocated tips			
					201524.28			184744.36			
d Contro	ol number				9 Advance EIC payment			10 Dependent care benefits			
	2295995							127			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12		
					103			G 3245			
	Brittney Rodriguez 9151 Ward Freeway Apt. 345				13 Statutory Retirement Third-party employee plan sick pay			12b			
								н	н 244		
Davistown IL 03189-9965					14 Other (see enclosed Notice to Employee)			12c			
								120			
				788							
				12d				1			
								829			
f Employee's address and ZIP code											
15 State	Employer's state ID nu	r's state ID number 16 State wages, tips, etc. 17 State income to		17 State income tax	18 Local wages, tips, etc. 19		19 1	9 Local income tax 20 Locality name			
OK	746-06	5-216	106647.55	7789.62		235674.61 4		46277.2		Wilson Viaduct	
GA	507-32	2-879	125938.33	6675.27		177286.6	38	522.2		Christine Drive	

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

