Eric Morton  7685 Olsen Bridge  South Heather WA 41747-6556   203  13 Statutory Retirement Third-party plan sick pay  X X X H 110  14 Other (see enclosed Notice to Employee) 12c	held  6  4.49					
198264.34   37629.12	6 49					
C Employer's name, address, and ZIP code   3 Social security wages   4 Social security tax withhele   148087.81   11328.72   11328	6 49					
Leblanc Ltd LLC	6 49					
81037 Christopher Crescent Kathleenmouth AR 99420-3655  d Control number 7872696  e Employee's first name and initial Tric Morton T685 Olsen Bridge South Heather  WA 41747-6556  5 Medicare wages and tips 217074.49 6295.16 7 Social security tips 148087.81 217074.  9 Advance EIC payment 10 Dependent care benefits 109 6003 13 Statutory employee plan Third-party slick pay Betirement Third-party sl	4.49 its					
Kathleenmouth AR 99420-3655  Kathleenmouth AR 99420-3655  217074.49  50cial security tips 148087.81  217074.  9 Advance EIC payment  10 Dependent care benefits 109  e Employee's first name and initial  Last name  11 Nonqualified plans 203  Eric Morton  7685 Olsen Bridge South Heather WA 41747-6556  14 Other (see enclosed Notice to Employee)  15 It Other (see enclosed Notice to Employee)  16 Copt of the sea of the s	4.49 its					
Rathleenmouth   AR   99420-3655   217074.49   6295.16     To Social security tips   8   Allocated tips	4.49 its					
d Control number 7872696  e Employee's first name and initial Teric Morton 7685 Olsen Bridge South Heather WA 41747-6556  148087.81 217074.  9 Advance EIC payment 10 Dependent care benefits 109  11 Nonqualified plans 203 6003 13 Statutory Retirement Third-party sick pay H 110 Employee Notice to Employee Plan X X X H 110  14 Other (see enclosed Notice to Employee) 12c	its					
d Control number 7872696  e Employee's first name and initial  Eric Morton 7685 Olsen Bridge South Heather  WA 41747-6556  9 Advance EIC payment 10 Dependent care benefits 109  11 Nonqualified plans 203 6003 13 Statutory Retirement Third-party sick pay plan plan sick pay X X X H 110  14 Other (see enclosed Notice to Employee) 12c	its					
7872696  e Employee's first name and initial Last name  11 Nonqualified plans  203 6003  Eric Morton  7685 Olsen Bridge  South Heather WA 41747-6556  11 Nonqualified plans 203 6003  13 Statutory Retirement Third-party plan 2 isck pay 12b mployee plan 2 isck pay 12b mployee plan 2 isck pay 110 mployee plan 2 isck pay 12b mployee plan 2 isck pay 12b mployee 14 Other (see enclosed Notice to Employee) 12c						
e Employee's first name and initial  Last name  11 Nonqualified plans 203 6003  Eric Morton 7685 Olsen Bridge South Heather WA 41747-6556  12 See instructions for box 203 ketirement Third-party plan sick pay X X X H 110  14 Other (see enclosed Notice to Employee) 12c	10v 12					
Eric Morton  7685 Olsen Bridge  South Heather WA 41747-6556   203  13 Statutory Retirement Third-party plan sick pay  X X X	10v 13					
Eric Morton  7685 Olsen Bridge  South Heather WA 41747-6556    13 Statutory Retirement Third-party employee plan   X   X     X     X     X     X     X     X     X     X     X     X     X   X     X	12a See instructions for box 12					
7685 Olsen Bridge  South Heather WA 41747-6556  Table 13 Statutory Retirement Intro-party sick pay   12b						
7685 Olsen Bridge  South Heather WA 41747-6556  X X X H 110  14 Other (see enclosed Notice to Employee) 12c						
South Heather WA 41/4/-6556	н 110					
н  967						
12d						
G 192						
f Employee's address and ZIP code						
15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Local wages, tips, etc.	Locality name					
AL 693-94-407 104639.52 9500.9 178220.85 31767.78 Brid	rian Valleys					
WY 114-06-559 104170.95 9269.91 175646.34 34662.53 Roge	ogers Turnpike					
Wage and Tax  Department of the TreasuryInternal Revenue Service  Statement  Department of the TreasuryInternal Revenue Service						

**Statement** Form W-2 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.

REISSUED a Employee's social security number		This information is being furnished to the Internal Revenue Service. If you are required						
<b>STATEMENT</b> 334-52-9061	OMB No	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 V	/ages, tips, other compensation		2 Federa	income tax	x withheld	
94-7157278		198264.:			37629.12			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld		
Leblanc Ltd LLC			148087.81			11328.72		
81037 Christopher Crescent		5 N	ledicare wages and tips		6 Medica	re tax withh		
Kathleenmouth AR 99420-3655		217074.49			6295.16			
Rathleenmouth AR 99420-3655			7 Social security tips			8 Allocated tips		
			148087.81			2170	74.49	
d Control number		9 A	dvance EIC payment		10 Depend	lent care b	enefits	
7872696						109		
e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12			
			203			6003		
Eric Morton		13 Statu			12b	1		
7685 Olsen Bridge		emplo	yee plan sick pay		Н	110		
South Heather WA 41747-655	6	14 C	ther (see enclosed Notice to Employ	ree)	12c	<u> </u>		
South Heather WA 41/4/-055	•				н	967		
				-	12d	907		
						1		
					G	192		
f Employee's address and ZIP code  15 State Employer's state ID number 16 State wages, tips, etc.	147 0000 0000 0000		40 Landon var Carata	140	ocal income tax			
, , , , , , , , , , , , , , , , , , , ,	17 State income tax		18 Local wages, tips, etc.				20 Locality name	
AL 693-94-407 104639.52	9500.9		178220.85	31	767.78		Brian Valleys	
WY 114-06-559 104170.95	9269.91		175646.34	34	662.53		Rogers Turnpike	

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

