REISSUED	a Employee's socia	al security number			Safe	Accurate,	Ref	HI	Visit the	IRS Website		
STATEMENT	14	19-37-5624	OMB	No. 1545-00	008 <b>FAS</b>	Γ! Use	5	<b>file</b>	at www.i	rs.gov/efile.		
b Employer identification number				1 Wages, tips, other compensation				Federal income tax withheld				
23-6780459				44187.14				7675.48				
c Employer's name, addre	s, and ZIP code			3 Social security wages				4 Social security tax withheld				
Melendez, Lloyd and Steele PLC				53161.35				4066.84				
5895 Michelle Meadow Apt. 792				5 Medicare wages and tips				6 Medicare tax withheld				
_			01 02	52945.45				1535.42				
North Darrellborough VA 27029-8192				7 5	7 Social security tips				8 Allocated tips			
					53161.35			52945.45				
d Control number				9 /	9 Advance EIC payment			10 Dependent care benefits				
5600448								245				
e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12				
				271				н 8932				
Edward Kelly				13 Statutory Retirement Third-party			у	12b				
43836 April Canyon Apt. 979				empl	employee plan sick pay			E	E 757			
Martinmouth CT 21341-8009				14 (	14 Other (see enclosed Notice to Employee)				1			
Marchimodell of 21341 0009								D	896			
								12d				
								D	387			
f Employee's address and	ZIP code											
15 State Employer's sta	te ID number	16 State wages, tips, etc.	17 State income ta:	х	18 Local wages	, tips, etc.	19 Lo	ocal income ta	(	20 Locality name		
OK 94:	-27-071	21608.27	1244.6		51953.1		652	6526.87		Stewart Coves		
ND 324	-41-583	22955.02	1502.4		45233.13		772	7726.18		Fritz Gateway		

Wage and Tax Statement 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 socia	al security number		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							
S	TATEMENT	14	19-37-5624	OMB	OMB No. 1545-0008 this income is taxable and you fail to report it.							
<b>b</b> Employer identification number					<ol> <li>Wages, tips, other compensation</li> </ol>			Federal income tax withheld				
	23-6780459					44187.14			7675.48			
<b>c</b> Emplo	c Employer's name, address, and ZIP code				3 8	3 Social security wages			4 Social security tax withheld			
Melendez, Lloyd and Steele PLC					53161.35			4066.84				
5895 Michelle Meadow Apt. 792				5 Medicare wages and tips 52945.45			Medicare tax withheld					
							1535.42					
North Darrellborough VA 27029-8192					7 8	7 Social security tips			8 Allocated tips			
						53161.35			52945.45			
<b>d</b> Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	5600448								245			
e Employee's first name and initial Last name				11 1	11 Nonqualified plans			12a See instructions for box 12				
Edward Kelly				271  13 Statutory Retirement Third-party employee plan sick pay			H 8932					
	43836 April Canyon Apt. 979					X		E	757			
	Martinmouth CT 21341-8009				14 (	14 Other (see enclosed Notice to Employee)			i			
						D	D 896					
							12d					
									D 387			
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.	110.1	ocal income	tov	20 Locality name			
	1 -3		9		^	· · · · · · · · · · · · · · · · · · ·				,		
OK	941-27	/ – U / T	21608.27	1244.6		51953.1		5526.87		Stewart Coves		
ND	324-41	L-583	22955.02	1502.4		45233.13 77		26.18		Fritz Gateway		

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

