REISSUED a Empl	oyee's social security number		Safe, Accurate, Visit the IRS					IRS Websit	e	
STATEMENT	324-17-1176	OMB No	. 1545-000	8 FAST! Use			e	at www.ii	s.gov/efile.	
b Employer identification number			1 Wages, tips, other compensation			2 Federal income tax withheld				
15-0872711			200728.09			31994.79				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld				
Combs-Fitzgerald Group			243928.27			18660.51				
98459 James Plaza Suite 274			5 Medicare wages and tips			6 Medicare tax withheld				
			164193.82				4761.62			
East Robertburgh OH 73183-2320			7 Social security tips			8 Allocated tips				
				243928.27			164193.82			
d Control number			9 Advance EIC payment			10 Dependent care benefits				
7773829						208				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Ronald Jones			186			E 2449				
			13 Statuto		Third-party	12b				
778 Ellen Tunnel Suite 966			employ	/ee plan	sick pay		E	774		
Ericashire NC 70453-2659			14 Other (see enclosed Notice to Employee)							
								246		
						12d				
							_			
							D	864		
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, e	tr 19	Local inc	ome tay		20 Locality	name
CT 623-42-450	= ' ' '	10907.08		234766.07		1795			Thomas	
023-42-450	103044.11	10307.00		234/00.07		1193	. 54		inomas	Fine
NE 383-38-482	102633.68	9430.85		161872.7	3:	3410	. 85		Thomas	Club

Wage and Tax

Form W-2 Statement

5070

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.

REISSUED	a Employee's soc	ial security number		This information is being furnished to the Internal Revenue Service. If you are required							
STATEMEN'	г 3	24-17-1176	OMB N	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			Wages, tips, other compensation			Federal income tax withheld					
15-0872711			200728.09			31994.79					
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Combs-Fitzgerald Group			243928.27			18660.51					
98459 James Plaza Suite 274 East Robertburgh OH 73183-2320			5 Medicare wages and tips			6 Medicare tax withheld					
			164193.82			4761.62					
			7 Social security tips			8 Allocated tips					
					243928.27	164193.82					
d Control number			9 Advance EIC payment			10 Dependent care benefits					
7773829							208				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Ronald Jones 778 Ellen Tunnel Suite 966 Ericashire NC 70453-2659			186 13 Statutory Retirement Third-party			E 2449					
			emple			_	E 77	774			
			14 (other (see enclosed Notice to Employ	12c						
						246					
							12d				
							I	86	864		
f Employee's address an		Transis is	Lie o			1			las i ii		
' '	ate ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local incon		20 Locali	•	
CT 62	3-42-450	105644.11	10907.08		234766.07	31	795.	54	Thoma	s Pine	
NE 38	3-38-482	102633.68	9430.85		161872.7	33	410.	85	Thoma	s Club	

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

