REISSUED a Employee's social security number		Safe, Accurate,		/isit the IRS Website			
STATEMENT 143-48-2962	OMB No. 1545-0	008 FAST! Use		at www.irs.gov/efile.			
b Employer identification number	1	Wages, tips, other compensation	2 Federal in	2 Federal income tax withheld			
98-1960268		189484.26	41106	41106.0			
c Employer's name, address, and ZIP code	3	Social security wages	4 Social se	4 Social security tax withheld			
Oliver-Peterson Ltd		180606.99	13816	13816.43			
64517 Watkins Drives Apt. 345	5	Medicare wages and tips		• modicalo tax mamola			
New Maryville ND 46450-2263		166875.09		4839.38			
New Maryville ND 40450 2205	7	Social security tips		8 Allocated tips			
		180606.99		166875.09			
d Control number	9	9 Advance EIC payment 10 Dependent care benefits					
5872115	11			145			
e Employee's first name and initial Last name		Nonqualified plans	12a See insti	12a See instructions for box 12			
Was Comment		244	н !	н 5788			
Mr. Corey	13 Stat	utory Retirement Third-part loyee plan sick pay	ty 12b				
575 Andre Manors	3.11			857			
Garciachester ID 51804-124	49 ¹⁴	Other (see enclosed Notice to Empl	oyee) 12c				
			G	632			
			12d				
			D .	794			
f Employee's address and ZIP code			1				
15 State Employer's state ID number 16 State wages, tips, etc. 17 St	ate income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
AR 044-16-228 103522.49 384	10.57	217731.49	19934.57	Fischer Corner			
OK 239-88-625 100545.09 451	18.23	235387.41	25496.28	Garcia Bridge			

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.

REISS	UED	a Employee's soci	al security numbe	er		This information is being furnished to the Internal Revenue Service. If you are required								
STATE	MENT	1	43-48-29	62	OMB	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 identi	ification number				JI.	1	s, other com					income tax	withheld	
98-1960268					189484.26				41106.0					
c Employer's name, address, and ZIP code					3	3 Social security wages				4 Social security tax withheld				
Oliver-Peterson Ltd					180606.99				13816.43					
64517 Watkins Drives Apt. 345				5	5 Medicare wages and tips				6 Medicare tax withheld					
New Maryville ND 46450-2263				166875.09				4839.38						
			7	7 Social security tips				8 Allocated tips						
					180606.99				166875.09					
d Control number				9	9 Advance EIC payment				10 Dependent care benefits					
5872115									145					
e Employee's first name and initial Last name			11	11 Nonqualified plans 1				12a See instructions for box 12						
				244				н 5788						
Mr.	Core	7				13 Stat	itory	Retirement	Third-party		12b			
575 Andre Manors				emp	oyee	plan	sick pay				857			
373	Andre	Manors					<u></u>	Щ.,,					657	
Garciachester ID 51804-1249			14	14 Other (see enclosed Notice to Employee)				12c		l				
								G	632					
											12d		i	
												D	794	
f Employee's add	dress and ZIP cod	le								Ī			<u>l</u>	
15 State Emp	loyer's state ID nu	ımber	16 State wages	s, tips, etc.	17 State income to	ıx	18 Loca	l wages, tips	, etc.	19 L	ocal inc	ome tax		20 Locality name
AR	044-16	5-228	103522.	49	3840.57		2177	31.49)	19	934	. 57		Fischer Corne
OK	239-88	3-625	100545.	.09	4518.23		2353	887.41		25	496	. 28		Garcia Bridg

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

