REISSUED a Employee's social security number	Safe, Accurate, Visit the IRS Website				
STATEMENT 714-37-1114	OMB No. 1545-0008 F	AST! Use	at www.	irs.gov/efile.	
b Employer identification number	1 Wages, tips, o	other compensation	2 Federal income ta	x withheld	
40-8420543	13972	20.59	15275.55		
c Employer's name, address, and ZIP code	3 Social security	y wages	4 Social security tax withheld		
Davila, Martin and Hawkins PLC	13684	18.22	10468.89		
43020 Henderson Green	5 Medicare wag	'	6 Medicare tax withheld		
Lake Christopher CA 60700-6583	16723		4849.75		
lake Christopher CA 00700-0303	7 Social security	' '	8 Allocated tips		
	13684		167232.81		
d Control number	9 Advance EIC	payment	10 Dependent care benefits		
916929			193		
e Employee's first name and initial Last name	11 Nonqualified p	olans	12a See instructions for box 12		
Diana Dian	230		2886		
Diana Rice	,		12b		
1320 Rodriguez Brooks Apt. 144		X sick pay	н 358		
South Desireeview TN 54914-9947	14 Other (see en	closed Notice to Employee)	12c		
504011 5051200 1011 111 0 1511 5511			508		
		-	12d		
			н 618		
f Employee's address and ZIP code			L		
15 State Employer's state ID number 16 State wages, tips, etc. 17 State	ncome tax 18 Local w	ages, tips, etc. 19 Loc	cal income tax	20 Locality name	
IN 385-93-776 71092.97 7169	. 85 12222	23.48 208	888.75	Christopher Wall	
WY 432-07-527 65722.95 7847	.91 17968	33.34 255	38.12	Adam Mountain	

Wage and Tax **Statement**

Form W-2

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.

F	REISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required						
S	TATEMENT	71	L4-37-1114	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 Emplo	yer identification number	•			1 Wages, tips, other compensation			Federal income tax withheld			
	40-8420543			139720.59			15275.55				
c Employer's name, address, and ZIP code			3	3 Social security wages			4 Social security tax withheld				
Davila, Martin and Hawkins PLC			136848.22			10468.89					
43020 Henderson Green			5	5 Medicare wages and tips			6 Medicare tax withheld				
Lake Christopher CA 60700-6583			167232.81			4849.75					
			7 Social security tips			8 Allocated tips					
			136848.22			167232.81					
d Contro	d Control number			9	9 Advance EIC payment			10 Dependent care benefits			
	916929							193			
e Emplo	e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12					
Diana Rice 1320 Rodriguez Brooks Apt. 144			230 13 Statutory Retirement Third-party			2886					
			employee plan sick pay			н	358				
South Desireeview TN 54914-9947			14	Other (see enclosed Notice to Emp	oyee)	12c					
South Desireeview in Sagia-9947						508					
						12d					
				Н	н 618						
	oyee's address and ZIP co		140 01-1	17 State income tax		Landa de la contraction de la	140	1 12		00 1	
15 State	Employer's state ID n		16 State wages, tips, etc.			10 2000 110 200 110 110 110 110 110 110		9 Local income tax		20 Locality name	
IN	385-93	3-776	71092.97	7169.85		122223.48	20	0888.75		Christopher Wall	
WY	432-07	7-527	65722.95	7847.91		179683.34	25	5538.12		Adam Mountain	

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

