REISSUED a Employee's social security number			Safe, Accurate	e,		Visit the IRS Website			
STATEMENT 756-89-9988	OMB N	o. 1545-00	DOS FAST! Use		*file	at www.irs.gov/efile.			
b Employer identification number		1 V	Vages, tips, other compensation	on	2 Federal	income tax withheld			
40-3701428			107859.66			18158.92			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Alvarez-Terrell Inc			115214.2			8813.89			
47941 Adrian Fall Suite 049			Medicare wages and tips		6 Medicare tax withheld				
South Ricky MI 46769-7015			97311.39		2822.03				
South Ricky MI 46769-7015			7 Social security tips			8 Allocated tips			
			115214.2			97311.39			
d Control number		9 A	Advance EIC payment		10 Depend	lent care benefits			
3294092						206			
e Employee's first name and initial Last name		11 N	lonqualified plans		12a See ins	structions for box 12			
M: -1 1			152		D	5980			
Michael Hall		13 Statu		rd-party	12b				
9198 Young Forest		emple	pyee plan sici	k pay		514			
Palmershire ME 44524-4799			Other (see enclosed Notice to	Employee)	12c				
						353			
					12d				
					P	269			
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 Locality name			
OR 723-76-693 51703.76	2569.78		101892.95	15	324.63	Scott Points			
AL 851-53-515 53644.68	3017.36		89357.24	11	246.86	Amanda Hills			

Wage and Tax 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	al security number		This information is being furnished to the Internal Revenue Service. If you are required								
STATEMENT	7	56-89-9988	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 nu	b Employer identification number			Wages, tips, other compensation			2 Federal income tax withheld					
40-3701428				107859.66			18158.92					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Alvarez-Terrell Inc			115214.2			8813.89						
47941 Adrian Fall Suite 049				5 Medicare wages and tips			6 Medicare tax withheld					
South Ricky MI 46769-7015			97311.39			2822.03						
			7 Social security tips			8 Allocated tips						
				115214.2			97311.39					
d Control number			9 Advance EIC payment			10 Dependent care benefits						
3294092								206				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12						
Michael Hall			152 13 Statutory Retirement Third-party			D 5980						
9198 Young Forest Palmershire ME 44524-4799				employee plan sick pay 14 Other (see enclosed Notice to Employee)			120	514				
							12c					
							353					
			12d									
							P	P 269				
f Employee's address and 2		1	T.= 2						1			
15 State Employer's stat		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax		20 Locality name			
OR 723	-76-693	51703.76	2569.78		101892.95	15	324.63		Scott Points			
AL 851	-53-515	53644.68	3017.36		89357.24	11	246.86		Amanda Hills			

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

