REISSUED	EISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website		
STATEMENT	82	2-87-2371	OMB N	o. 1545-00	08 FAST! Use		≁file	at www.irs.gov/efile.		
b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld			
99-8630752					148120.52			50448.9		
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Allen, Torres and Ruiz and Sons				125363.69			9590.32			
926 Kimberly Alley Apt. 961 Mckenzieton PA 98081-1718				5 Medicare wages and tips			6 Medicare tax withheld			
					181064.3		5250.86			
				7 Social security tips			8 Allocated tips			
					125363.69			181064.3		
d Control number			9 Advance EIC payment			10 Dependent care benefits				
3984765								200		
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Eric Torres				132			2265			
				13 Statutory Retirement Third-party employee plan sick pay			12b	1		
089 Rebecca Mills Apt. 260				employee plan sick pay			G	G 981		
West Javierside UT 79314-1997				14 Other (see enclosed Notice to Employee)			12c	i		
							н	940		
			12d							
								196		
f Employee's address and ZIP c	nde							130		
15 State Employer's state ID		16 State wages, tips, etc.	17 State income tax	!	18 Local wages, tips, e	tc. 19	Local income tax	20 Locality name		
AZ 265-0	5-877	78458.69	3768.56		189111.9	19	9500.67	Peterson Ramp		
W V 547-5	8-249	71779.23	4616.26		170179.07	19	9629.04	Lopez Branch		

Wage and Tax

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.

REISSUED a Employee's social security number				This information is being furnished to the Internal Revenue Service. If you are required							
SI	STATEMENT 822-87-2371 OMB				B 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				1 Wages, tips, other compensation			Federal income tax withheld				
99-8630752				148120.52			50448.9				
c Emplo	yer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld				
Allen, Torres and Ruiz and Sons				125363.69			9590.32				
926 Kimberly Alley Apt. 961				5 N	ledicare wages and tips	6 Medicare tax withheld					
Mckenzieton PA 98081-1718					181064.3			5250.86			
					7 Social security tips			8 Allocated tips			
					125363.69			181064.3			
d Contro	d Control number				9 Advance EIC payment			10 Dependent care benefits			
	3984765						200				
e Emplo	e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
				132			2265				
	Eric Torres				13 Statutory Retirement Third-party						
089 Rebecca Mills Apt. 260				emple	oyee plan sick pay			G 981			
	_				14 Other (see enclosed Notice to Employee)			12c			
West Javierside UT 79314-1997					,			0.40			
								н 940			
							12d	1			
					196						
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.		Local incor		20 Locality name		
AZ	265-05-877	78458.69	3768.56		189111.9	19	500.	67	Peterson Ramp		
wv	547-58-249	71779.23	4616.26		170179.07	19	629.	04	Lopez Branch		

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

