R	EISSUED	a Employee's socia	•			Safe	, Accurate,	e 🖸	w H		Visit the	IRS Webs	site
ST	ATEMENT	69	92-06-8495	OMB N	lo. 1545-0	008 <b>FAS</b>	T! Use			e	at www.i	rs.gov/efile	Э.
<b>b</b> Employ	yer identification number				1	Wages, tips, other	compensation		2	Federal	income tax	withheld	
	92-0573332					228530	. 49		28	8996	6.67		
<b>c</b> Employ	yer's name, address, and Z	IP code			3	Social security was	ges		4	Social s	ecurity tax	withheld	
	Thomas, Leo	nard and	Woodard Ltd			277602	. 22				6.57		
:	2560 Thomas	Circles			5	Medicare wages a	•		6	Medicar	e tax withh		
Allenview NH 93753-6485					206540.74				5989.68				
	UTTEHATEM	NII 93	733-0403		7	Social security tips			8 /	Allocate			
						277602						40.74	
<b>d</b> Control					9	Advance EIC payr	nent		10	Depend	ent care be	enefits	
4	4324077										122		
e Employ	yee's first name and initial	Last name			11	Nonqualified plans	3		12a	See ins	tructions	for box 12	
_				227  13 Statutory Retirement Third-party employee plan sick pay				E 4720					
Trevor Bowman								12b					
;	86988 Oliv	ia Brook	:		X		X				752		
1	Hamptonsid	A NV	38512-4387		14	Other (see enclose	ed Notice to Employ	yee)	12c				
-	namp consid		30312 4307							G	903		
								-	12d	G	903		
									124				
										P	369		
	yee's address and ZIP cod		Lan Outron Const	17 000000000000000000000000000000000000	1	140.1		140				00 1 "	
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages	• • •		ocal inco			20 Localit	y name
ND	268-62	-466	114161.83	5384.93		211555	. 83	24	842.	91		Maynard	Motorway
NM	606-40	-613	113633.58	6288.56		267937	. 66	34	646.	63		Tony	Ramp

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 soci	al security number			This information is being furn							
STATEMENT	6	92-06-8495	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	2 Federal income tax withheld						
92-0573332					228530.49			28996.67				
c Employer's name, address, a	nd ZIP code			3	Social security wages		4 Social s	security tax	withheld			
Thomas, Leonard and Woodard Ltd					277602.22	21236.57						
2560 Thomas Circles				5	Medicare wages and tips	6 Medicare tax withheld 5989.68						
					206540.74							
Allenview NH 93753-6485					Social security tips	8 Allocated tips						
			277602.22			206540.74						
d Control number				9	Advance EIC payment		10 Depend	dent care b	enefits			
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e Employee's first name and ini	Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
Trevor Bowman 86988 Olivia Brook				227  13 Statutory Retirement Third-party employee plan sick pay			E 4720		)			
Hamptonside NY 38512-4387					14 Other (see enclosed Notice to Employee)			12c G 903				
							12d	1				
							P	369				
f Employee's address and ZIP		Transis is in	Transition in		Train in the second	1.0	<u> </u>		Tag i iii			
15 State Employer's state ID		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax	(	20 Locality name			
ND 268-0	62-466	114161.83	5384.93		211555.83	24	842.91		Maynard Motorwa			
NM 606-4	40-613	113633.58	6288.56		267937.66	34	646.63		Tony Ram			

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

