REISSUED a Employee's social security number		Safe, Accurate		Visit the IRS Website			
STATEMENT 668-62-2737	OMB No. 1545	-0008 FAST! Use	irse file	at www.irs.gov/efile.			
b Employer identification number	1	Wages, tips, other compensatio	n 2 Federa	2 Federal income tax withheld			
91-4722993		121764.53	3651	36517.37			
c Employer's name, address, and ZIP code	3	Social security wages	4 Social s	4 Social security tax withheld			
Pierce, Lewis and Frost Ltd		85237.25	6520	6520.65			
264 Jennifer Parks	5	Medicare wages and tips	6 Medica	• modicalo tax mamola			
Dishardton NT 20652 0700		150487.31		4364.13			
Richardton NJ 32653-0789	7	Social security tips	8 Allocate	8 Allocated tips			
		85237.25		150487.31			
d Control number	9	Advance EIC payment	10 Depend	10 Dependent care benefits			
2739454				123			
e Employee's first name and initial Last name		Nonqualified plans	12a See ins	12a See instructions for box 12			
Kimberly Bauer		146		3342			
			i-party 12b				
88962 Breanna Ports Suite 777	er	mployee plan sick		415			
West Michellehaven IL 99719-028		Other (see enclosed Notice to E	mployee) 12c	ı			
			G	421			
			12d	1			
			P	133			
f Employee's address and ZIP code				133			
1 2/2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
VA 430-38-821 58127.47 2	683.41	139574.93	20254.83	Rocha Center			
DE 879-95-540 58684.52 2	687.47	131583.8	16768.8	Burch Ridges			

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.

F	REISSUED	a Employee's soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
S	TATEMENT	6	68-62-2737	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 identification number			1 '	1 Wages, tips, other compensation			2 Federal income tax withheld					
91-4722993				121764.53			36517.37					
c Employer's name, address, and ZIP code				3	3 Social security wages			4 Social security tax withheld				
Pierce, Lewis and Frost Ltd					85237.25			6520.65				
264 Jennifer Parks				5	5 Medicare wages and tips			6 Medicare tax withheld				
				150487.31			4364.13					
Richardton NJ 32653-0789				7	7 Social security tips			8 Allocated tips				
				85237.25			150487.31					
d Contro	ol number				9 /	Advance EIC payment		10	0 Depend	dent care be	enefits	
	2739454									123		
e Employee's first name and initial Last name		11	11 Nonqualified plans			12a See instructions for box 12						
Kimberly Bauer				146			3342					
			13 State	13 Statutory Retirement Third-party			12b					
88962 Breanna Ports Suite 777			emp	oyee plan	sick pay		E	415				
66902 Breamma Ports Surte 111						` .		413				
West Michellehaven IL 99719-028				14	Other (see enclosed Notice	e to Employ	ree) 1	2c	ĺ			
						G	421					
								1:	2d	1		
									P	133		
f Emplo	ovee's address and ZIP co	de										
15 State	Employer's state ID no	umber	16 State wages, tips, etc.	17 State income ta	х	18 Local wages, tips, e	etc.	19 Loca	al income tax	(20 Locality name	
VA	430-38	8-821	58127.47	2683.41		139574.93		202	54.83		Rocha Center	
DE	879-95	5-540	58684.52	2687.47		131583.8		1670	68.8		Burch Ridges	

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

