REISSUED a Employee's social security number						Safe, Accurate, Visit the IRS Website at www.irs.gov/efile							
S	TATEMENT	20	03-97-3191	Of	MB No. 1545-0	008 FAST! U	Jse	<u> </u>	ШЕ	at www.i	rs.gov/efile.		
b Employer identification number						1 Wages, tips, other compensation			Federal income tax withheld				
83-1355374						112317.91			21826.58				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Fisher LLC LLC						124680.46				9538.06			
7661 Kevin Flat Apt. 710						5 Medicare wages and tips				6 Medicare tax withheld			
Toddtown WA 53296-6801						134272.57				3893.9			
					7	7 Social security tips				8 Allocated tips			
						124680.46				134272.57			
d Control number						9 Advance EIC payment			10 Dependent care benefits				
4429021									279				
e Emplo	yee's first name and initial	Last name	е		11	11 Nonqualified plans				12a See instructions for box 12			
	<b>~1</b>	a:17				284				P 7247			
Clarence Gillespie						13 Statutory Retirement Third-party employee plan sick pay						-	
9640 Ronnie Mountains Suite 579					emp	loyee plan	sick pay			731			
North Patriciamouth AL 79761-5604					14	4 Other (see enclosed Notice to Employee)			12c	1			
									н	470			
									12d	1			
										711			
f Employee's address and ZIP code										1			
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income	e tax	18 Local wages, tips	s, etc.	19 Loc	cal income ta	X	20 Locality n	ame	
NJ	640-70	-134	55758.45	6089.82	!	131270.70	6	133	63.45		Reyes Mou	ıntain	
ID	184-94	-748	59991.47	5733.28	1	114199.09	9	163	19.56		Alicia	Via	
Wage and Tax					1. N	Department of the TreasuryInternal Revenue Service							
Form W.	.₂ Statem	ent		_ <b>_</b>	ע ע								

**Statement** Form W-2

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 to file a tax return, a negligence penalty or other sanction may be imposed on you if								
S	TATEMENT	2	03-97-3191	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					1 Wages, tips, other compensation				2 Federal income tax withheld				
83-1355374						112317.91				21826.58			
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Fisher LLC LLC						124680.46				9538.06			
7661 Kevin Flat Apt. 710						5 Medicare wages and tips				6 Medicare tax withheld			
Toddtown WA 53296-6801					134272.57				3893.9				
					7 Social security tips				8 Allocated tips				
					124680.46				134272.57				
d Control number					9 Advance EIC payment				10 Dependent care benefits				
	4429021										279		
e Emplo	oyee's first name and initial	Last nam	е		11 Nonqualified plans				12a See instructions for box 12				
	Clarence Gillespie					284				P 7247			
							ement Third-party		12b		, ,		
9640 Ronnie Mountains Suite 579 North Patriciamouth AL 79761-5604					employee plan sick pay						731		
					14 Other (see enclosed Notice to Employee)				12c				
										н 470			
									12d				
											711		
f     Employee's address and ZIP code       15     State     Employer's state ID number     16     State wages, tips, etc.     17     State income tax					140 1		140	12			00.1		
	• •		9			10 =010 Hager, Hps, 110			9 Local income tax			20 Locality name	
NJ	640-70	J-134 	55758.45	6089.82		131270.76		13	13363.45			Reyes Mountain	
ID	184-94	1-748	59991.47	5733.28		114199	.09	16	319	. 56		Alicia Via	

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

