REISSUED a Empl	REISSUED a Employee's social security number				ite,	THE STATE OF THE S	Visit the IRS Website			
STATEMENT	701-88-1682	OMB N	o. 1545-000	8 FAST! Use		*file	at www.irs.gov/efile.			
<b>b</b> Employer identification number	Employer identification number			1 Wages, tips, other compensation			2 Federal income tax withheld			
75-8718511			169152.99			61427.29				
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld				
Nunez-Francis and Sons			135556.59			10370.08				
0605 Hernandez Estates			5 Medicare wages and tips			6 Medicare tax withheld				
			149214.46			4327.22				
Danielborough DE 23428-4723			7 Social security tips			8 Allocated tips				
				135556.59			149214.46			
d Control number			9 Advance EIC payment			10 Dependent care benefits				
6105713							232			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Stacey Jones			184			D 9144				
			13 Statutory Retirement Third-party			12b				
89890 Martinez Rest Suite 028			employee plan sick pay			G	G 472			
D 1 32 1 1 27 00041 0006				her (see enclosed Notice t	o Employee)	12c				
Port Nancyburgh HI 27041-3956						_				
						E 727				
						120	1			
						E	626			
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 ta	x 20 Locality name			
MO 073-41-378	76491.09	4437.74		200024.26	22	2581.75	Lisa Crest			
FL 992-46-195	91817.44	4061.07		156487.21	26	628.41	Joshua Loaf			

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 soc	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
S	TATEMENT	7	01-88-1682	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>b</b> Emplo	b Employer identification number				1		2 Federal income tax withheld					
75-8718511						169152.99			61427.29			
c Employer's name, address, and ZIP code					3	3 Social security wages			4 Social security tax withheld			
Nunez-Francis and Sons					135556.59			10370.08				
0605 Hernandez Estates Danielborough DE 23428-4723				5 Medicare wages and tips			6 Medicare tax withheld					
				149214.46 7 Social security tips			4327.22 8 Allocated tips					
d Control number				9 Advance EIC payment			10 Dependent care benefits					
6105713							232					
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12						
			184			D 9144						
	Stacey Jones			13 Statutory Retirement Third-party			12b					
89890 Martinez Rest Suite 028			emp	oloyee plan sick pay			G	472				
				14	Other (see enclosed Notice to Employ	(ee)	12c	•				
Port Nancyburgh HI 27041-3956				Carer (acc chalcact House to Employ	,00,		1					
								E  727				
								12d	ı			
									E	626		
	yee's address and ZIP co	de					•					
15 State	Employer's state ID n	umber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	Local inco	me tax		20 Locality name	
MO	073-4	L-378	76491.09	4437.74		200024.26	22	581.	75		Lisa Crest	
FL	992-4	6-195	91817.44	4061.07		156487.21	26	628.	41		Joshua Loaf	

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

