	REISSUED TATEMENT	a Employee's socia	al security number 39-31-1530	OMB No	o. 1545-00	Safe, Acc	417	se v	ile		IRS Website														
	over identification number		77 31 1330			/ages, tips, other comp		2	Federa	al income ta	Ü														
24-1564631						89150.49				21568.42															
c Emplo	oyer's name, address, and Z	3 Social security wages			4	4 Social security tax withheld																			
Pierce, Andrews and Everett Group					85198.44				6517.68																
1407 Bradley Pass Suite 207 New Kelly AZ 60652-6377					5 Medicare wages and tips 93237.97 7 Social security tips				6 Medicare tax withheld 2703.9 8 Allocated tips																
																		85198.44				93237.97			
													d Control number					9 Advance EIC payment			10	10 Dependent care benefits			
6342786									275																
e Employee's first name and initial Last name					11 Nonqualified plans			12:	12a See instructions for box 12																
	Jean Hanson				272																				
					13 Statutory Retirement Third-party				b																
139 Mitchell Estates Suite 031					employee plan sick pay					312															
	New Amy	ID	92153-7323		14 0	ther (see enclosed No	tice to Employ	yee) 12	C	i															
									128																
								12	d	1															
									н	933															
f Emplo	yee's address and ZIP code	9								1															
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips	etc.	19 Local	income ta	X	20 Locality name														
DC	996-79	-908	46537.15	5364.85		109321.43		1152	5.37		Michael Circle														
WI	406-90	-464	44642.99	5339.81		74296.57		1716	7.29		Michelle Rue														
	147	and Tass																							

Wage and Tax

Statement Form W-2

5070

Department of the Treasury--Internal Revenue Service

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 soc	ial security number			This information is being furn																	
STATEMENT	5	39-31-1530	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														
24-1564631					89150.49			21568.42														
c Employer's name, address, and ZIP code					Social security wages	4 Social security tax withheld																
Pierce, Andrews and Everett Group 1407 Bradley Pass Suite 207 New Kelly AZ 60652-6377					85198.44	6517.68																
					5 Medicare wages and tips 93237.97 7 Social security tips			6 Medicare tax withheld 2703.9 8 Allocated tips														
																85198.44			93237.97			
												d Control number					9 Advance EIC payment			10 Dependent care benefits		
6342786								275														
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12														
Jean Hanson				272			5160															
				13 Stat		у	12b															
139 Mitchell Estates Suite 031					employee plan sick pay			312	2													
New Amy	ID	92153-7323		14	Other (see enclosed Notice to Emplo	oyee)	12c	1														
<u></u>								128														
							12d															
							н	933														
f Employee's address and ZIP		AC Chata was as time at	17 State income tax		10	40.1	Local income tax		1 20 1lit													
15 State Employer's state ID		16 State wages, tips, etc.			18 Local wages, tips, etc.	1		L	20 Locality name													
DC 996-7	79-908	46537.15	5364.85		109321.43	+++	.525.37		Michael Circle													
WI 406-9	0-464	44642.99	5339.81		74296.57	17	167.29		Michelle Ru													

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

