REI	ISSUED	a Employee's socia	l security number			Sa	ife, Accurate,	Re 1	AH O	Visit the	IRS Webs	ite	
STA	TEMENT	64	18-70-9273	OMB N	o. 1545-00	008 <b>F</b> /	AST! Use		<b>file</b>	at www.i	rs.gov/efile	١.	
<b>b</b> Employer identification number					1 V	1 Wages, tips, other compensation				Federal income tax withheld			
75-0407580						215600.12				79244.39			
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Rodriguez-Valdez PLC						212041.45				16221.17			
89997 Jamie Estates Apt. 849 Port Williamside DC 46515-2397						5 Medicare wages and tips				6 Medicare tax withheld			
						170479.2				4943.9			
						7 Social security tips				8 Allocated tips			
						212041.45				170479.2			
d Control nu	ımber				9 Advance EIC payment				10 Dependent care benefits				
12	227183								146				
e Employee's first name and initial Last name						11 Nonqualified plans				12a See instructions for box 12			
_	-				249				6950				
Paul Contreras						. ,	irement Third-par	ty	12b				
232 Teresa Fords Apt. 807						employee plan sick pay				н 324			
West Davidfort MD 94308-8137						14 Other (see enclosed Notice to Employee)							
West Davidioit MD 94300-0137									G 732				
									12d				
									124				
										748			
	's address and ZIP cod		T	T.= -		T					1		
	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax			ges, tips, etc.		ocal income ta	x	20 Locality	name	
OR	742-49	-979	103189.39	8839.49		16009	0.51	399	995.77		Michael	Points	
MA	391-85	-915	113632.8	13197.66		17449	7.56	390	055.34		Samuel	Branch	

Wage and Tax

This information is being furnished to the Internal Revenue Service.

5070 **Statement** Form W-2 Copy B--To Be Filed with Employee's FEDERAL Tax Return

Department of the Treasury--Internal Revenue Service

Cut here. Keep lower portion for your records.

REISS	UED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required								
STATE	MENT	64	18-70-9273	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			
75-0407580						215600.12				79244.39			
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld			
Rodriguez-Valdez PLC					212041.45				16221.17				
89997 Jamie Estates Apt. 849 Port Williamside DC 46515-2397					5 Medicare wages and tips 170479.2				6 Medicare tax withheld 4943.9				
													7 Social security tips
					212041.45				170479.2				
					d Control number	d Control number					9 Advance EIC payment		
1227	1227183									146			
e Employee's first	name and initial	Last name	9		11 Nonqualified plans				12a See instructions for box 12				
Paul Contreras 232 Teresa Fords Apt. 807						249				6950			
						13 Statutory Retirement Third-party							
						employee plan sick pay			н 324				
West Davidfort MD 94308-8137					14 Other (see enclosed Notice to Employee)			(00)	120				
					Other (see enclosed Notice to Employee)				120				
									G 732				
									12d	1			
					!				748				
f Employee's add													
1 .	oyer's state ID n		16 State wages, tips, etc.	17 State income tax		10 = 2000 11 11 11 11 11 11 11 11 11 11 11 11			9 Local income tax		20 Locality name		
OR	742-49	9-979	103189.39	8839.49		160090.51		399	39995.77		Michael Points		
MA	391-85	5-915	113632.8	13197.66		174497	7.56	390	055.34		Samuel Branch		

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

