R	REISSUED	a Employee's socia	I security number			Safe, A	ccurate,	O ASH	Visit the	IRS Website	
ST	<b>TATEMENT</b>	77	6-29-4389	OMB N	o. 1545-0	0008 <b>FAST!</b>	Use	e~fil	at www.	irs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation			2 Federal income tax withheld		
82-9129225						134106.06			34120.31		
c Employer's name, address, and ZIP code					3	3 Social security wages			4 Social security tax withheld		
Durham, Hall and Thomas and Sons						112280.91			8589.49		
542 Matthew Locks West Darryl ID 48552-7134					5	Medicare wages and	•	6			
						147313.1	.8		4272.08		
'	west Darryi	10 4	0552-7154		7	Social security tips		8 /	8 Allocated tips		
						112280.91			147313.18		
d Contro	l number				9	9 Advance EIC payment			10 Dependent care benefits		
	1448005								189		
e Employee's first name and initial Last name					11 Nonqualified plans			12a	12a See instructions for box 12		
					212				3612		
Dr. Kaitlyn 02771 Melissa Bridge Suite 830 Johnsonmouth NY 94515-7950					13 Statutory Retirement Third-party			12b	12b		
					employee plan sick pay  14 Other (see enclosed Notice to Employee)				238		
								ee) 12c			
									315	315	
								12d			
									588		
f Employ	vee's address and ZIP cod	•							500		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	ļ	18 Local wages, ti	os, etc.	19 Local inco	me tax	20 Locality name	
NV	143-06	-321	68438.12	4077.44		125275.7	2	14350.	99	Cassandra Ford	
			E0100 60	4611 00		00050 50		05006		I	
WV	645-36	-020	70189.69	4611.22		98852.76		25836.	63	Paul Drive	

Wage and Tax

Form W-2 Statement

5010

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 so	OMB N	OMB No. 1545-0008  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 this income is taxable and you fail to report it.							
	yer identification number	1 Wages, tips, other compensation			2 Federal income tax withheld					
82-9129225					134106.06			34120.31		
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld		
Durham, Hall and Thomas and Sons					112280.91			8589.49		
542 Matthew Locks West Darryl ID 48552-7134					5 Medicare wages and tips			6 Medicare tax withheld		
					147313.18	4272.08				
1	West Darryl ID		7 Social security tips			8 Allocated tips				
					112280.91			147313.18		
d Contro	l number	9 Advance EIC payment			10 Dependent care benefits					
	1448005				189					
e Emplo	yee's first name and initial Last na	ame		11 Nonqualified plans			12a See instructions for box 12			
Dr. Kaitlyn 02771 Melissa Bridge Suite 830				212  13 Statutory Retirement Third-party employee plan sick pay			3612 12b 238			
Johnsonmouth NY 94515-7950					14 Other (see enclosed Notice to Employee)			12c		
John John John John John John John John								315		
					12d					
								588		
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		19 I	Local income tax 20 Locality name			
NV	143-06-321	68438.12	4077.44		125275.72		350.99		Cassandra Ford	
	143 00 321				123213.12		550.99		Cassandra Ford	
WV	645-36-020	70189.69	4611.22		98852.76	25	836.63		Paul Drive	

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

