REISSUED a E	Employee's social security number		Safe, Accurate,					t the IRS Website		
STATEMENT	396-36-5355	OMB No	o. 1545-000	8 FAST! Use			at w	ww.irs.gov/efile.		
<b>b</b> Employer identification number		·	1 Wa	ages, tips, other compens	ation	2	Federal inco	me tax withheld		
32-1354009				153253.34			25184.43			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Scott-Eaton Inc			144706.28			11070.03				
54973 Baker Station			5 Medicare wages and tips			6 Medicare tax withheld				
Laurenfurt MT 92119-5752			119133.88			3454.88				
Hauremuic Mr 92119-5752				7 Social security tips			8 Allocated tips			
				144706.28			119133.88			
d Control number			9 Advance EIC payment			10 Dependent care benefits				
3252973						233				
e Employee's first name and initial	Last name		11 No	nqualified plans		12a	See instruct	tions for box 12		
Dennis Patterson			104			P 5054				
			13 Statutory Retirement Third-party employee plan sick pay			12b	i			
77238 Caldwell Station Apt. 237			employ	pen	SICK PAY		D 87	7		
East Russell SD 42987-3253			<b>14</b> Otl	ner (see enclosed Notice	to Employee)	12c	ì			
							E 62	21		
						12d	12d			
							E 40	)1		
f Employee's address and ZIP code							,	_		
15 State Employer's state ID number	· · · ·	17 State income tax		18 Local wages, tips, etc	-	Local inco		20 Locality name		
CO 019-54-1	144 78724.25	8464.32		151598.11	18	8612.	64	Raymond Plaza		
WV 146-30-1	78330.08	9704.74		180677.5	2	7802.	.51	Brown Vista		

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.

F	REISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required					
	TATEMENT	39	96-36-5355	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				Wages, tips, other compensation			Federal income tax withheld		
32-1354009				153253.34			25184.43			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld		
Scott-Eaton Inc					144706.28			11070.03		
54973 Baker Station				5 Medicare wages and tips			6 Medicare tax withheld			
Laurenfurt MT 92119-5752			119133.88			3454.88				
			7 Social security tips			8 Allocated tips				
				144706.28			119133.88			
d Control number				9 Advance EIC payment			10 Dependent care benefits			
3252973								233		
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Dennis Patterson			104			P 5054				
	Delilis Facterson			13 Statutory Retirement Third-party employee plan sick pay			12b	1		
77238 Caldwell Station Apt. 237						D	877			
East Russell SD 42987-3253			14 Other (see enclosed Notice to Employee)			12c	i I			
						E	E 621			
								12d	1	
							E	E 401		
	yee's address and ZIP cod									
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		10 = 100 mag 20, mp 2, 010 mg		Local income tax		20 Locality name
СО	019-54	-144	78724.25	8464.32		151598.11	18	612.6	4	Raymond Plaza
wv	146-30	-178	78330.08	9704.74		180677.5		7802.51		Brown Vista

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

