REISSUED a Employee's social security number		Safe, Accur	ate,	A SHIP	Visit the IRS Website		
STATEMENT 543-60-8966	OMB No. 1545-0	008 FAST! Use		*file	at www.irs.gov/efile.		
b Employer identification number	1	Wages, tips, other compens	sation	2 Federa	l income tax withheld		
64-3574562		102107.21			19026.84		
c Employer's name, address, and ZIP code	3	3 Social security wages			4 Social security tax withheld		
Valencia, Howe and Kemp Group		111326.94			8516.51		
635 Scott Highway Apt. 107	5				6 Medicare tax withheld		
Chapmantown LA 33006-3985	7	119748.75 Social security tips		3472.71 8 Allocated tips			
	'	111326.94		• Allocate	119748.75		
d Control number	9	Advance EIC payment		10 Depend	dent care benefits		
6410680					174		
e Employee's first name and initial Last name	11	Nonqualified plans		12a See ins	structions for box 12		
Christopher Schroeder		111			н 6027		
		13 Statutory Retirement Third-party employee plan sick pay			12b		
12196 Davis Villages Suite 424	EIII	pian pian	X	E	421		
West Debrastad WY 02330-3764	14	Other (see enclosed Notice	to Employee)	12c	i		
				H	408		
				12d	ı		
					451		
f Employee's address and ZIP code		1					
	income tax	18 Local wages, tips, etc		Local income tax	20 Locality name		
KS 352-85-500 46124.36 5604	.81	101471.59	20	178.11	Richard Lake		
MT 678-65-085 55612.51 3604	. 2	104929.69	13	693.35	Tammy Stravenue		

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 soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
S	TATEMENT	54	43-60-8966	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 Emplo	yer identification number	•		<u>'</u>	1 Wages, tips, other compensation				Federal income tax withheld			
64-3574562			102107.21				19026.84					
c Employer's name, address, and ZIP code			3 Social security wages				4 Social security tax withheld					
Valencia, Howe and Kemp Group			111326.94				8516.51					
635 Scott Highway Apt. 107				5 Medicare wages and tips				6 Medicare tax withheld				
				119748.75				3472.71				
Chapmantown LA 33006-3985			7 Social security tips				8 Allocated tips					
						111326.94	ļ			1197	48.75	
d Contro	ol number				9	Advance EIC payment			10 Deper	ndent care b	enefits	
	6410680									174		
e Employee's first name and initial Last name		11 Nonqualified plans				12a See instructions for box 12						
	Christophe	er Sch	roeder		13 Stat	111 Retirement	Third-party		H	6027		
12196 Davis Villages Suite 424			employee plan sick pay				E	421				
West Debrastad WY 02330-3764			14	Other (see enclosed No	tice to Employ	yee)	12c	ı				
						Н	408					
								-	12d			
								451				
f Emplo 15 State	eyee's address and ZIP cod Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips	etc	10 17	ocal income ta	v	20 Locality name	
KS	352-85		46124.36	5604.81		101471.59		1	178.11		1	
12	352-83	3-300	40124.30	3604.61		1014/1.55	, 	20.	1/0.11		Richard Lake	
МТ	678-65	5-085	55612.51	3604.2		104929.69)	136	693.35		Tammy Stravenue	

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

