R	EISSUED	a Employee's socia	l security number				Safe, Accu	rate,		Visit the	IRS Websit	е	
ST	ATEMENT	20	7-86-2271	OMB N	lo. 1545-0	8000	FAST! Use		wfile .	at www.i	irs.gov/efile.		
b Employer identification number					1	1 Wages, tips, other compensation				2 Federal income tax withheld			
87-8474694						148084.44				41653.03			
c Employ	er's name, address, and Z	ZIP code			3	3 Social security wages				4 Social security tax withheld			
Freeman, Patterson and Taylor LLC						181655.02				13896.61			
5737 Richard Walks Suite 452 Lake Jamesland NV 98838-5973					5 Medicare wages and tips				6 Medicare tax withheld				
					123231.62				3573.72				
_	Lake Jamesiand NV 98838-3973					7 Social security tips				8 Allocated tips			
						181655.02				123231.62			
d Control number						9 Advance EIC payment			10 Dependent care benefits				
2	2095247									131			
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12					
					198			н 1497					
	Chase Wilkerson					13 Statutory Retirement Third-party employee plan sick pay				1			
6163 Craig Plaza					X Sick pay					692			
Reevesfurt KS 52969-6133						14 Other (see enclosed Notice to Employee)				12c			
Reevesiuit NS 32909-0133								646					
								12d					
										783			
f Employee's address and ZIP code										1.00			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Loc	cal wages, tips, et	c. 19	Local income ta	X	20 Locality	name	
DC	673-00	-932	79302.34	5967.14		144	006.81	19	9612.73		Garrett	Cape	
sc	001-87	001-87-358 74633.15 6265.99			148664.05 2		2:	23626.36		Charles	Plain		

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.

REI	ISSUED	a Employee's socia	l security number	This information is being furnished to the Internal Revenue Service. If you are required								
STA	TEMENT	20	7-86-2271	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 id	b Employer identification number					Wages, tips, other compensation			2 Federal income tax withheld			
87-8474694						148084.44		41653.03				
c Employer's	s name, address, and 2	ZIP code			3 Social security wages			4 Social security tax withheld				
Freeman, Patterson and Taylor LLC					181655.02			13896.61				
5737 Richard Walks Suite 452					5 N	ledicare wages and tips		6 Medicare tax withheld 3573.72 8 Allocated tips				
					123231.62							
Lа	Lake Jamesland NV 98838-5973					ocial security tips						
					181655.02			123231.62				
d Control number					9 Advance EIC payment			10 Dependent care benefits				
20	2095247								131			
e Employee's	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
Ch	Chase Wilkerson 6163 Craig Plaza				198			н 1497				
01.					13 Statu emple			12b				
61					x			692				
Reevesfurt KS 52969-6133					14 (other (see enclosed Notice to Employ	ree)	12c				
								646				
								12d				
								783				
f Employee's address and ZIP code									T			
	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		3, , , , , ,		9 Local income tax		20 Locality name		
DC	673-00	-932	79302.34	5967.14	144006.81 1		196	19612.73		Garrett Cape		
sc	001-87	-358	74633.15	6265.99		148664.05	236	626.36		Charles Plain		

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

