REISSUED	REISSUED a Employee's social security number			Safe, Accurate,			Visit the IRS Website			
STATEMENT	67	79-16-9791	OMB N	o. 1545-0	008 FAST! Use			at www.i	rs.gov/efile.	
b Employer identification number	•		·	1	Wages, tips, other compe	nsation	2 F	ederal income ta	x withheld	
26-7087160				238334.21			27649.46			
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld		
Brown-Garcia and Sons				280329.48			21445.21			
36311 Debra Plain				5 Medicare wages and tips			6 Medicare tax withheld			
Johnberg CO 53149-8071				191428.01			5551.41			
bolimberg Co 33149-8071				7 Social security tips			8 Allocated tips			
				280329.48			191428.01			
d Control number				9 Advance EIC payment 1			10 D	10 Dependent care benefits		
5680654							163			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
			261			2938				
Victoria Morales				13 Statutory Retirement Third-party employee plan sick pay			12b			
1272 Price Highway				Citig	jien jien	SICK Pay]	E 515		
New Scott	AL	92936-1875		14	Other (see enclosed Notice	e to Employee)	12c	ı		
11011 20000 111 21200 1070							G 613			
							12d			
								326		
f Employee's address and ZIP of	ode							I		
15 State Employer's state ID	number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, e	tc. 19	Local incor	ne tax	20 Locality name	
MD 114-5	3-235	121652.2	12326.35		226218.83	3'	7997.	84	Blake Street	
ME 296-8	7-185	119910.52	12310.97		184646.21	3	0427.	65	Dunlap Square	

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.

R	EISSUED a Employee's soci	This information is being furnished to the Internal Revenue Service. If you are required									
ST	ATEMENT 6	79-16-9791	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 Employ	ver identification number			Wages, tips, other compensation			Federal income tax withheld				
26-7087160				238334.21			27649.46				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Brown-Garcia and Sons				280329.48			21445.21				
36311 Debra Plain				5 Medicare wages and tips			6 Medicare tax withheld				
				191428.01			5551.41				
,	Johnberg CO 53149-8071				7 Social security tips			8 Allocated tips			
				280329.48			191428.01				
d Control	d Control number				9 Advance EIC payment			10 Dependent care benefits			
!	5680654							163			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
			261			2938					
'	Victoria Morales				13 Statutory Retirement Third-party			12b			
1272 Price Highway				employee plan sick pay			E 515				
1	New Scott AL	92936-1875		14 (Other (see enclosed Notice to Employ	/ee)	12c				
New Scott All 92930-1073							G 613				
						F	12d	013			
								326			
	vee'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.		ocal income tax		20 Locality name		
MD	114-53-235	121652.2	12326.35		226218.83	37	997.84		Blake Street		
ME	296-87-185	119910.52	12310.97		184646.21	30	427.65		Dunlap Square		

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

