REISSUED				Safe, Accurate,				Visit the IRS Website		
STATEMENT	096-06-11	L77	OMB No. 154	5-0008	FAST! Use	<u></u>		at www.irs	s.gov/efile.	
<b>b</b> Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld			
57-9956822				231996.32			52407.44			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Harris, Hall and Page Ltd				215106.94			16455.68			
42791 Stanton Vista				5 Medicare wages and tips			6 Medicare tax withheld			
				200723.25			5820.97			
North Reginaldchester OR 10669-868				7 Social security tips			8 Allocated tips			
				215106.94			200723.25			
d Control number				9 Advance EIC payment			10 Dependent care benefits			
4556163								114		
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12			
One I h				139			E 7101			
Scott Greene				13 Statutory Retirement Third-party employee plan sick pay			12b			
92464 Pope Summit Apt. 167				X	X X			869		
South Cory PA 47497-5074				14 Other (see enclosed Notice to Employee)			12c			
202011 00-1 = 1 : 10 : 00 : 1							G 949			
						1	12d			
							G	541		
f Employee's address and ZIP code						H		<u> </u>		
15 State Employer's state ID num		s, tips, etc. 17 State	income tax	18 Loca	I wages, tips, etc.	19 Loc	cal income tax		20 Locality name	
MI 199-95-	-859 110572	.89 9024	.59	2707	69.04	404	64.13		Parker Falls	
ID 092-67-	-396 118670	.5 8220	. 68	1852	200.88	334	19.72		Ana Cove	

Wage and Tax

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.

REISSUED a Employee's social security number	This information is being furnished to the Internal Revenue Service. If you are required							
STATEMENT 096-06-1177	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 identification number	1 1	Vages, tips, other compensation	2 Federal	income tax withheld				
57-9956822		231996.32	52407	52407.44				
c Employer's name, address, and ZIP code	3	Social security wages	4 Social s	4 Social security tax withheld				
Harris, Hall and Page Ltd		215106.94	16455	16455.68				
42791 Stanton Vista	5	Medicare wages and tips	6 Medicar	6 Medicare tax withheld 5820.97 8 Allocated tips				
	,	200723.25						
North Reginaldchester OR 10669-868	7	Social security tips	8 Allocate					
		215106.94		200723.25				
d Control number	9	Advance EIC payment	10 Depend	10 Dependent care benefits				
4556163				114				
e Employee's first name and initial Last name	11	lonqualified plans	12a See ins	12a See instructions for box 12				
		139	E	7101				
Scott Greene	13 State		12b					
92464 Pope Summit Apt. 167	X emp	pyee plan sick pay		869				
South Cory PA 47497-5074	14	Other (see enclosed Notice to Emplo	yee) 12c					
			G	949				
			12d					
			G	541				
f Employee's address and ZIP code			<u> </u>	241				
	income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name				
MI 199-95-859 110572.89 9024	.59	270769.04 40		Parker Falls				
ID 092-67-396 118670.5 8220	. 68	185200.88	33419.72	Ana Cove				

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

