REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website							
STATEMENT 618-47-8997	OMB No	o. 1545-0008	FAST! Use	G I	at at	www.irs.gov/efile.			
b Employer identification number			1 Wages, tips, other compensation			Federal income tax withheld			
68-5860435			132545.18			26032.69			
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld			
Bauer-Singh Inc			123290.03			9431.69			
4883 Ashley Islands Apt. 786			5 Medicare wages and tips			6 Medicare tax withheld			
			120845.02			3504.51			
Port Sarah TN 23021-2221			7 Social security tips			8 Allocated tips			
			123290.03			120845.02			
d Control number			9 Advance EIC payment			10 Dependent care benefits			
5055845					2	47			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12			
	242			9676					
Brian Alvarado	13 Statutory Retirement Third-party								
063 Bernard Point	employee	plan sick pay		G 4	23				
Port Valeriefort NC 43	14 Other (see enclosed Notice to Employee)								
1010 (4101101010 10 10				4	09				
				12d					
					E 5	66			
f Employee's address and ZIP code					E 3	00			
15 State Employer's state ID number 16 State wages, tips	, etc. 17 State income tax	18 Local	l wages, tips, etc.	19 Local in	come tax	20 Locality name			
IL 143-12-881 70881.8	5843.09	1523	97.87	23112	. 97	David Street			
AL 277-33-887 68231.83	7050.66	1545	45.78	23251	. 98	Joanne Mall			

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.

RE	EISSUED	a Employee's socia	l security number		This information is being furnished to the Internal Revenue Service. If you are required						
ST	ATEMENT	61	.8-47-8997	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 identification number			Wages, tips, other compensation			Federal income tax withheld					
68-5860435			132545.18			26032.69					
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Bauer-Singh Inc			123290.03			9431.69					
4883 Ashley Islands Apt. 786			5 Medicare wages and tips			6 Medicare tax withheld					
			120845.02			3504.51					
Port Sarah TN 23021-2221			7 Social security tips			8 Allocated tips					
			123290.03			120845.02					
d Control number			9 Advance EIC payment			10 Dependent care benefits					
5055845							247				
e Employee's first name and initial Last name			11 Nonqualified plans 12a			12a See ins	See instructions for box 12				
Brian Alvarado 063 Bernard Point			242 13 Statutory Retirement Third-party employee plan sick pay			9676 G 423					
Port Valeriefort NC 43741-2119			14 (Other (see enclosed Notice to Employ	ree)	12c					
Port valerielort NC 43/41-2119						409					
								12d	1		
			!			E 566					
f Employee's address and ZIP code								•			
15 State	Employer's state ID nur		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	
IL	143-12	-881	70881.8	5843.09		152397.87 2		23112.97		David Street	
AL	277-33	-887	68231.83	7050.66		154545.78 23		23251.98		Joanne Mall	

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

