


|  |  |   |  |  |  |   |  |
|--|--|---|--|--|--|---|--|
| <b>REISSUED STATEMENT</b>  |  | a Employee's social security number<br><b>117-23-9223</b> |  | Safe, Accurate,<br>FAST! Use                          |  | Visit the IRS Website<br>at www.irs.gov/efile.    |  |
| b Employer identification number<br><b>30-5639984</b>  |  |   |  | 1 Wages, tips, other compensation<br><b>214024.42</b>  |  | 2 Federal income tax withheld<br><b>68750.47</b>  |  |
| c Employer's name, address, and ZIP code<br><b>Watts, Thompson and Schroeder LLC</b><br><b>70499 Dustin Inlet</b><br><b>Kaylafurt CT 07142-3361</b>      |  |   |  | 3 Social security wages<br><b>248305.16</b>  |  | 4 Social security tax withheld<br><b>18995.34</b> |  |
|  |  |   |  | 5 Medicare wages and tips<br><b>176731.12</b>  |  | 6 Medicare tax withheld<br><b>5125.2</b>          |  |
|  |  |   |  | 7 Social security tips<br><b>248305.16</b>   |  | 8 Allocated tips<br><b>176731.12</b>              |  |
| d Control number<br><b>418768</b>  |  |   |  | 9 Advance EIC payment  |  | 10 Dependent care benefits<br><b>219</b>          |  |
| e Employee's first name and initial Last name<br><br><b>Claudia Miller</b><br><b>9942 Parker Lodge Suite 268</b><br><b>West Elizabethtown MN 39548-0</b> |  |   |  | 11 Nonqualified plans<br><b>116</b>  |  | 12a See instructions for box 12<br><b>H 6434</b>  |  |
|  |  |   |  | 13 Statutory employee Retirement plan Third-party sick pay<br><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  | 12b <b>E 837</b>                                  |  |
|  |  |   |  | 14 Other (see enclosed Notice to Employee)   |  | 12c <b>207</b>                                    |  |
|  |  |   |  |  |  | 12d <b>112</b>                                    |  |
| f Employee's address and ZIP code  |  |   |  | 15 State   |  | 16 State wages, tips, etc.                        |  |
| MO   |  | Employer's state ID number<br><b>169-52-120</b>           |  | 17 State income tax<br><b>4208.52</b>  |  | 18 Local wages, tips, etc.<br><b>258356.85</b>    |  |
| WY   |  | 545-65-996  |  | 106362.02  |  | 19 Local income tax<br><b>37671.98</b>            |  |
|  |  | 107914.69   |  | 4708.91  |  | 20 Locality name<br><b>Derek Corner</b>           |  |
|  |  | 245575.67   |  | 35961.34   |  | <b>Price Path</b>                                 |  |

**Wage and Tax  
Statement**

**2010**

Department of the Treasury--Internal Revenue Service

Form W-2  
Copy B--To Be Filed with Employee's FEDERAL Tax Return  
This information is being furnished to the Internal Revenue Service.

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Cut here. Keep lower portion for your records.

|  |  |   |  |  |  |  |  |
|--|--|---|--|--|--|--|--|
| <b>REISSUED STATEMENT</b>  |  | a Employee's social security number<br><b>117-23-9223</b> |  | OMB No. 1545-0008  |  | This information is being furnished to the Internal Revenue Service. If you are required 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<br><b>30-5639984</b>  |  |   |  | 1 Wages, tips, other compensation<br><b>214024.42</b>  |  | 2 Federal income tax withheld<br><b>68750.47</b>   |  |
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|  |  | 245575.67   |  | 35961.34   |  | <b>Price Path</b>  |  |

**Wage and Tax  
Statement**

**2010**

Department of the Treasury--Internal Revenue Service

Form W-2  
Copy C For EMPLOYEE'S RECORDS.  
(See enclosed Notice to Employee.)

Safe, accurate,  
FAST! Use

