F	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website				
S	TATEMENT	36	55-76-0209	OMB 1	No. 1545-0	0008 FAST!	Use	G 11	le	at www.i	rs.gov/efile.		
b Emplo	Employer identification number				1	1 Wages, tips, other compensation			2 Federal income tax withheld				
72-5259005						76854.19			20575.64				
c Emplo	yer's name, address, and 2	ZIP code			3	3 Social security wages			4 Social security tax withheld				
Rollins-Brooks LLC						92996.29			7114.22				
70672 Trevor Cape					5	5 Medicare wages and tips				6 Medicare tax withheld			
West Lorraine DE 20519-5241						94644.5				2744.69			
					7	7 Social security tips				8 Allocated tips			
						92996.29			94644.5				
d Control number					9	9 Advance EIC payment			10 Dependent care benefits				
9401353									138				
e Employee's first name and initial Last name					11	11 Nonqualified plans			12a See instructions for box 12				
					108				E 7993				
	Natalie Brandt					13 Statutory Retirement Third-party							
2943 Crystal Run East Tiffanyton FL 65648-8388					employee plan sick pay			ree) 12c		582			
					14	14 Other (see enclosed Notice to Employee)				Ī			
									D	802			
									12d				
									G	392			
f Emplo	vee's address and ZIP cod	۵							-	332			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tip	os, etc.	19 Local in	come tax		20 Locality name		
TN	669-24	-058	39644.46	2058.17		88540.37		11728	.71		Robert Mountain		
KS	009-39	-545	40025.13	2098.43		54526.67		13226	5.57		Robert Forks		
•													

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								ice. If you are required			
STATEMENT	OTATION TO SIDE 3 CF 3 C							nction may b	e imposed on you if		
b Employer identification number					this income is taxable and you fail to 1 Wages, tips, other compensation			2 Federal income tax withheld			
72-5259005					76854.19			20575.64			
c Employer's name, address	s, and ZIP code			3 Social security wages			4 Social security tax withheld				
Rollins-Brooks LLC					92996.29			7114.22			
70672 Trevor Cape West Lorraine DE 20519-5241					5 Medicare wages and tips			6 Medicare tax withheld			
					94644.5			2744.69			
					7 Social security tips			8 Allocated tips			
					92996.29			94644.5			
d Control number				9 Advance EIC payment			10 Dependent care benefits				
9401353				ļ			138				
e Employee's first name an	d initial Last nam	е		11 Nonqualified plans			12a See instructions for box 12				
37 - 4 - 7					108			E 7993			
Natalle	Natalie Brandt					13 Statutory Retirement Third-party					
2943 Crystal Run East Tiffanyton FL 65648-8388					employee plan sick pay X 14 Other (see enclosed Notice to Employee)			582			
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f Employee's address and ZIP code								G 392			
	The state of the s			18 Local wages, tips, etc. 19		19	Local income ta	20 Locality name			
	-24-058	39644.46	2058.17	= ' ' '		11	728.71	Robert Mountain			
						†			†		
KS 009	-39-545	40025.13	2098.43	54526.67 1		13	226.57	Robert Forks			

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

