


<b>REISSUED STATEMENT</b>		a Employee's social security number <b>426-78-4726</b>		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number <b>35-3835247</b>				1 Wages, tips, other compensation <b>138994.99</b>		2 Federal income tax withheld <b>21834.7</b>	
c Employer's name, address, and ZIP code <b>Giles and Sons Inc 338 Hill Ramp West Barry NE 81037-9848</b>				3 Social security wages <b>172764.87</b>		4 Social security tax withheld <b>13216.51</b>	
				5 Medicare wages and tips <b>112319.36</b>		6 Medicare tax withheld <b>3257.26</b>	
				7 Social security tips <b>172764.87</b>		8 Allocated tips <b>112319.36</b>	
d Control number <b>6593318</b>				9 Advance EIC payment		10 Dependent care benefits <b>163</b>	
e Employee's first name and initial Last name  <b>Jasmine Gray 86004 Gary Flats Port Jonhaven WY 87693-3851</b>				11 Nonqualified plans <b>285</b>		12a See instructions for box 12 <b>G 1487</b>	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		12b <b>H 596</b>	
				14 Other (see enclosed Notice to Employee)		12c <b>E 565</b>	
						12d <b>574</b>	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
15 State		Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
<b>GA</b>		<b>265-85-900</b>		<b>63505.1</b>		<b>7066.35</b>	
<b>DE</b>		<b>062-66-443</b>		<b>74449.73</b>		<b>6248.63</b>	
						<b>131125.75</b>	
						<b>168826.56</b>	
						<b>17923.1</b>	
						<b>19430.51</b>	
						<b>Roberson Drives</b>	
						<b>Stacey Shore</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.

-----  
Cut here. Keep lower portion for your records.

<b>REISSUED STATEMENT</b>		a Employee's social security number <b>426-78-4726</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 <b>35-3835247</b>				1 Wages, tips, other compensation <b>138994.99</b>		2 Federal income tax withheld <b>21834.7</b>	
c Employer's name, address, and ZIP code <b>Giles and Sons Inc 338 Hill Ramp West Barry NE 81037-9848</b>				3 Social security wages <b>172764.87</b>		4 Social security tax withheld <b>13216.51</b>	
				5 Medicare wages and tips <b>112319.36</b>		6 Medicare tax withheld <b>3257.26</b>	
				7 Social security tips <b>172764.87</b>		8 Allocated tips <b>112319.36</b>	
d Control number <b>6593318</b>				9 Advance EIC payment		10 Dependent care benefits <b>163</b>	
e Employee's first name and initial Last name  <b>Jasmine Gray 86004 Gary Flats Port Jonhaven WY 87693-3851</b>				11 Nonqualified plans <b>285</b>		12a See instructions for box 12 <b>G 1487</b>	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		12b <b>H 596</b>	
				14 Other (see enclosed Notice to Employee)		12c <b>E 565</b>	
						12d <b>574</b>	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
15 State		Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
<b>GA</b>		<b>265-85-900</b>		<b>63505.1</b>		<b>7066.35</b>	
<b>DE</b>		<b>062-66-443</b>		<b>74449.73</b>		<b>6248.63</b>	
						<b>131125.75</b>	
						<b>168826.56</b>	
						<b>17923.1</b>	
						<b>19430.51</b>	
						<b>Roberson Drives</b>	
						<b>Stacey Shore</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

