REISSUED a Employee's social security number	Safe, Accurate, Visit the IRS Website				
STATEMENT 418-41-9387	OMB No. 1545-0008	at www.irs.gov/efile.			
b Employer identification number	 Wages, tips, other compensation 	Federal income tax withheld			
04-3522571	177471.45	59722.44			
c Employer's name, address, and ZIP code	3 Social security wages	4 Social security tax withheld			
Lewis-Perez Ltd	213810.3	16356.49			
559 Callahan Rapid Suite 850	5 Medicare wages and tips	6 Medicare tax withheld			
New Courtney TN 72112-2152	125081.19	3627.35			
New Courtney IN 72112-2132	7 Social security tips	8 Allocated tips			
	213810.3	125081.19			
d Control number	9 Advance EIC payment	10 Dependent care benefits			
7604380		183			
e Employee's first name and initial Last name	11 Nonqualified plans	12a See instructions for box 12			
T	183	3931			
Jerry King	13 Statutory Retirement Third-part	y 12b			
049 Chase Skyway	employee plan sick pay	361			
Carlyland CT 03011-2529	14 Other (see enclosed Notice to Emple	oyee) 12c			
		P 142			
		12d			
		н 906			
f Employee's address and ZIP code		•			
15 State Employer's state ID number 16 State wages, tips, etc. 17 State	come tax 18 Local wages, tips, etc.	19 Local income tax 20 Locality name			
LA 380-71-094 82220.69 6959	01 221263.2	30481.11 Fitzgerald Lodge			
CA 321-61-185 88774.04 8070	220957.4	31965.36 Tammy Drive			

Wage and Tax Statement

Form W-2

5070

Department of the Treasury--Internal Revenue Service

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.

REISSUE	a Employee's soci	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
STATEME	_	L8-41-9387	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 identificati	lentification number			1 Wages, tips, other compensation			2 Federal income tax withheld				
04-3522571			177471.45			59722.44					
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld					
Lewis-Perez Ltd			213810.3			16356.49					
559 Callahan Rapid Suite 850			5 Medicare wages and tips 125081.19			6 Medicare tax withheld 3627.35					
_											
New Courtney TN 72112-2152			7 Social security tips			8 Allocated tips					
					213810.3			1250	81.19		
d Control number				9 A	dvance EIC payment		10 Depend	ent care be	nefits		
7604380						183					
e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12						
-	77.				183			3931			
Jerry	King			13 Statu			12b				
049 C	hase Skyway			emplo	yee plan sick pay			361			
Carlyland CT 03011-2529				14 C	ther (see enclosed Notice to Employ	ee)	12c				
0011710110 01 00011 1010						P 142					
							12d				
								006			
						-	H	906			
f Employee's address 15 State Employer	and ZIP code 's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 10	ocal income tax		20 Locality name		
	880-71-094	82220.69	6959.01		221263.2		481.11		,		
<u>тъ</u>	000-11-034	02220.03	0939.01		ZZ1Z03.Z	304	301.11		Fitzgerald Lodge		
CA 3	321-61-185	88774.04	8070.44		220957.4	319	965.36		Tammy Drive		

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

