R	REISSUED a Employee's social security number				Safe, Accurate,						Visit the IRS Website				
ST	TATEMENT	30	2-77-2765	OMB N	o. 1545-0	8000	FAST! Use		~fi	ظ	at www.i	rs.gov/efile	Э.		
b Employer identification number					1 Wages, tips, other compensation				2 Federal income tax withheld						
45-0956765						75877.45				20558.29					
c Employ	yer's name, address, and 2	3	4 Social security tax withheld												
Cole, Anderson and Jackson Group						56283.53				4305.69					
3871 Evans Springs					5 Medicare wages and tips				6 Medicare tax withheld						
Port Jessica NE 85899-3101						76917.15					2230.6				
						7 Social security tips					8 Allocated tips				
		56283.53					76917.15								
d Control number						9 Advance EIC payment 10 De					pendent care benefits				
	4642578					156									
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12						
Dale Logan					104				D 6603						
					13 Statutory Retirement Third-party employee plan sick pay				12b						
3295 Valerie Glens Taylorborough AR 66029-1060						X SILK PAY					E 625				
						14 Other (see enclosed Notice to Employee)				ı					
										D 880					
										12d					
											418				
f Employee's address and ZIP code															
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local	wages, tips, etc.	19	Local inco	ome tax		20 Localit	y name		
ME	672-26	-753	37065.69	3141.06		8943	5.04	14	029.	. 88		Miguel	Station		
ND	350-40	-694	39112.54	3007.02		5394	0.35	13	628.	06		Burns	Circle		

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.

REI	ISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required											
STA	TEMENT	30	02-77-2765	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 i	1 Wages, tips, other compensation					2 Federal income tax withheld										
45-0956765						75877.45				20558.29						
c Employer's	3 Social security wages					4 Social security tax withheld										
Co	56283.53					4305.69										
3871 Evans Springs Port Jessica NE 85899-3101						5 Medicare wages and tips 76917.15					6 Medicare tax withheld 2230.6					
																7 Social security tips
						56283.53				76917.15						
						d Control number						9 Advance EIC payment				
46	4642578											156				
e Employee's first name and initial Last name						11 Nonqualified plans				12a See instructions for box 12						
Dale Logan 3295 Valerie Glens Taylorborough AR 66029-1060						104					D 6603					
						13 Statutory Retirement Third-party				12b						
						employee plan sick pay					E	625				
						14 Other (see enclosed Notice to Employee)										
						14 Other (see cholosed Notice to Employee)										
											D	880				
										12d		I				
										418						
f Employee's address and ZIP code												•				
15 State	Employer's state ID nu	ımber	16 State wages, tips, etc.	17 State income tax		18 Local w	ages, tips,	etc.	19 L	ocal inc	ome tax		20 Locality name			
ME	672-26	5-753	37065.69	3141.06		89435	.04		140	029	. 88		Miguel Station			
ND	350-40	-694	39112.54	3007.02		53940	.35		13	628	.06		Burns Circle			

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

