R	EISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website			
ST	TATEMENT	78	31-59-6219	OMB N	o. 1545-0	008 FAST	! Use	G	file	at www.i	rs.gov/efile.	
b Employer identification number					1 \	1 Wages, tips, other compensation			Federal income tax withheld			
61-5214278						60424.2			18467.98			
c Emplo	yer's name, address, and Z	IP code			3 Social security wages				4 Social security tax withheld			
Mercado and Sons Inc					63458.38				4854.57			
25923 Andrew Harbor Suite 513 Wrightland LA 67829-7164					5 Medicare wages and tips				6 Medicare tax withheld			
					48790.52				1414.93			
					7 Social security tips				8 Allocated tips			
					63458.38				48790.52			
d Control number					9 Advance EIC payment			10	10 Dependent care benefits			
6972793									190			
e Employee's first name and initial Last name					11 Nonqualified plans			1	12a See instructions for box 12			
	Anthony Petersen					280			E 8079			
						13 Statutory Retirement Third-party employee plan sick pay				1		
410 Hoffman Junction Apt. 819				X State Park 14 Other (see enclosed Notice to Employee)				P 52				
Carlostown NH 34476-6685								12c				
									903			
									12d			
									н	478		
f Employee's address and ZIP code												
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages,	tips, etc.	19 Loca	al income tax	(20 Locality name	
MI	678-21	-712	32511.51	1945.19		57487.15 1		113	11376.47		Scott Throughway	
ID	518-88	-614	30587.3	3011.05	54699.16		659	9.05	Morris Estate			

Wage and Tax Statement 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.

F	REISSUED a Employee's social security number This information is being furnished to the Internal Revenue											
S	STATEMENT 781-59-6219 OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed on this income is taxable and you fail to report it.						e imposed on you ii					
b Emplo	b Employer identification number					1 Wages, tips, other compensation			2 Federal income tax withheld			
61-5214278					60424.2			18467.98				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Mercado and Sons Inc 25923 Andrew Harbor Suite 513					63458.38			4854.57				
					5 N	Medicare wages and tips	6 Medicare tax withheld 1414.93					
						48790.52						
	Wrightland LA 67829-7164					7 Social security tips			8 Allocated tips			
					63458.38			48790.52				
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	6972793								190			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
						280			E 8079			
	Anthony Petersen				13 Statutory Retirement Third-party			12b				
	410 Hoffman Junction Apt. 819 Carlostown NH 34476-6685					x plan sick pay 14 Other (see enclosed Notice to Employee)			P 524			
									12c			
									ſ			
									903			
									12d			
									478			
f Employee's address and ZIP code							[
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		10 2000 110900, 1100 1100		ocal income tax	:	20 Locality name		
MI	678-21	L-712	32511.51	1945.19		57487.15		1376.47		Scott Throughway		
ID	518-88	3-614	30587.3	3011.05		54699.16 65		99.05	Morris Estate			

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

