


REISSUED STATEMENT		a Employee's social security number 617-33-5723		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number 06-4450361				1 Wages, tips, other compensation 41451.68		2 Federal income tax withheld 9660.18	
c Employer's name, address, and ZIP code Holder PLC and Sons 203 Munoz Gardens Russellland SD 60662-8572				3 Social security wages 52269.24		4 Social security tax withheld 3998.6	
				5 Medicare wages and tips 51907.27		6 Medicare tax withheld 1505.31	
				7 Social security tips 52269.24		8 Allocated tips 51907.27	
d Control number 1142020				9 Advance EIC payment		10 Dependent care benefits 293	
e Employee's first name and initial Last name Holly Lucero 1108 Clay Loop New Willliamburgh SC 05487-75				11 Nonqualified plans 274		12a See instructions for box 12 7944	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		12b P 629	
				14 Other (see enclosed Notice to Employee)		12c G 828	
						12d E 947	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
VA		417-34-566		17 State income tax		18 Local wages, tips, etc.	
NH		492-27-417		19 Local income tax		20 Locality name	
		22256.42		8043.68		Hernandez Squares	
		1370.89		7530.24		Davis Neck	
		30528.29					

**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.

REISSUED STATEMENT		a Employee's social security number 617-33-5723		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 06-4450361				1 Wages, tips, other compensation 41451.68		2 Federal income tax withheld 9660.18	
c Employer's name, address, and ZIP code Holder PLC and Sons 203 Munoz Gardens Russellland SD 60662-8572				3 Social security wages 52269.24		4 Social security tax withheld 3998.6	
				5 Medicare wages and tips 51907.27		6 Medicare tax withheld 1505.31	
				7 Social security tips 52269.24		8 Allocated tips 51907.27	
d Control number 1142020				9 Advance EIC payment		10 Dependent care benefits 293	
e Employee's first name and initial Last name Holly Lucero 1108 Clay Loop New Willliamburgh SC 05487-75				11 Nonqualified plans 274		12a See instructions for box 12 7944	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		12b P 629	
				14 Other (see enclosed Notice to Employee)		12c G 828	
						12d E 947	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
VA		417-34-566		17 State income tax		18 Local wages, tips, etc.	
NH		492-27-417		19 Local income tax		20 Locality name	
		22256.42		8043.68		Hernandez Squares	
		1370.89		7530.24		Davis Neck	
		30528.29					

**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

