F	REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website								
S	TATEMENT	5	60-16-9036	OM	/IB No. 1545-00	08 FA	ST! Use	J	7 111	6	at www.i	rs.gov/efile).
b Employer identification number					1 V	1 Wages, tips, other compensation			2 Federal income tax withheld				
01-9888251						57966.7			16563.0				
c Emplo	yer's name, address, and 2	IP code			3 S	3 Social security wages				4 Social security tax withheld			
Cook, Gaines and Silva and Sons						44055.81			3370.27				
2717 Stephanie Islands					5 N				6 Medicare tax withheld				
-						59872.67			1736.31				
East Johnside DC 58571-3446					7 8	7 Social security tips			8 Allocated tips				
						44055.	81				5987	2.67	
d Contro	ol number				9 A	9 Advance EIC payment			10 Dependent care benefits				
7769153									287				
e Employee's first name and initial Last name					11 N	11 Nonqualified plans			12a See instructions for box 12				
						231			G 8753				
	Gerald F	'reeman				13 Statutory Retirement Third-party			12b				
051 Steven Tunnel Suite 827				X	oyee plan	sick pay			D	351			
West Brandi LA 58385-6376					14	ther (see encl	osed Notice to Emp	loyee)	12c		1		
Nest Branch Mr. 50505 0570										P	489		
									12d		1		
										D	394		
f Emplo	yee's address and ZIP cod	е									l.		
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income	tax	18 Local wag	jes, tips, etc.	19	Local inc	come tax	(20 Locality	/ name
KS	280-01	-929	29325.74	1536.81		46223.24 69		69	954.8			Nicole	Radial
IL	591-88	-207	26242.81	1452.22		73119.1		10	.0580.35			Adkins	Stream
Wage and Tax Statement						Department of the TreasuryInternal Revenue Service							

Wage and Tax **Statement**

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	a Employee's soo	cial security number			This information is being furn							
STATEMENT	STATEMENT 560-16-9036 OM				b 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 identification numb	b Employer identification number				1 Wages, tips, other compensation			2 Federal income tax withheld				
01-9888251					57966.7			16563.0				
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld				
Cook, Gaines and Silva and Sons					44055.81			3370.27				
2717 Stephanie Islands					Medicare wages and tips	6 Medicare tax withheld						
-					59872.67	1736.31						
East John	East Johnside DC 58571-3446				7 Social security tips			8 Allocated tips				
					44055.81			59872.67				
d Control number	d Control number					9 Advance EIC payment			10 Dependent care benefits			
7769153	7769153							287				
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12				
						231			G 8753			
Gerald Freeman				13 Statutory Retirement Third-party			12b					
051 Steven Tunnel Suite 827					employee plan sick pay			D 351				
West Brandi LA 58385-6376					Other (see enclosed Notice to Emp	12c						
West Blandi LA 30303 0370						P	P 489					
						12d						
								394				
f Employee's address and ZIP	anda						D	334				
15 State Employer's state II		16 State wages, tips, etc.	17 State income tax	:	18 Local wages, tips, etc.	19	Local income tax		20 Locality name			
KS 280-	280-01-929 29325.74 1536.81		46223.24		69	954.8	Nicole Radial					
									İ			
IL 591-	591-88-207 26242.81 1452.			73119.1 1			580.35	Adkins Stream				

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

