F	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website		
S	TATEMENT	54	18-60-2096	ON	/IB No. 1545-0	0008 FAST! U	se	# file	at www.i	rs.gov/efile.	
<b>b</b> Employer identification number					1 Wages, tips, other compensation			2 Federa	2 Federal income tax withheld		
83-4821494						163366.97			51277.85		
c Employer's name, address, and ZIP code					3	3 Social security wages			4 Social security tax withheld		
Pace, Jordan and Peters Ltd						132485.42			10135.13		
267 Michelle Fort Apt. 646 Port Markburgh MT 39640-3186					5	Medicare wages and tip		6 Medica	3532.89		
						121823.67					
FOIC Markburgh Mr 59040-5100					7	7 Social security tips			8 Allocated tips		
						132485.42			121823.67		
d Control number					9	9 Advance EIC payment			10 Dependent care benefits		
	9523210								119		
e Employee's first name and initial Last name					11	11 Nonqualified plans			12a See instructions for box 12		
	Watthan Dh	-1				144			2000		
Matthew Phelps					13 Statutory Retirement Third-party employee plan sick pay			12b	1		
45411 Sheila Park Suite 862 East Morganchester ME 62964-4					Citi	14 Other (see enclosed Notice to Employee)			492		
					14				1		
									104		
							12d	12d			
								920			
f Employee's address and ZIP code									J20		
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income	tax	18 Local wages, tips	, etc.	19 Local income ta	х	20 Locality name	
RI	707-69	-325	75895.2	6811.84		201474.36		25500.93		Jacob Fields	
IL	311-11	-401	77079.01	6735.69		136634.85	,	28679.16	<b></b>	Joshua Path	
	J11 11	301	7,073.01	0,33.09		130034.00	<u> </u>	200,9.10		Joshua Facil	

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.

F										rice. If you are required	
S	TATEMENT	5	48-60-2096	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 identification number					1 Wages, tips, other compensation			Federal income tax withheld			
83-4821494						163366.97			51277.85		
c Employer's name, address, and ZIP code					3	3 Social security wages			4 Social security tax withheld		
Pace, Jordan and Peters Ltd						132485.42			10135.13		
267 Michelle Fort Apt. 646					5	5 Medicare wages and tips			Medicare tax withheld		
					121823.67			3532.89			
	Port Markburgh MT 39640-3186					7 Social security tips			8 Allocated tips		
						132485.42			121823.67		
d Contro	ol number				9 /	9 Advance EIC payment			10 Dependent care benefits		
	9523210							119			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12		
	Matthew Phelps 45411 Sheila Park Suite 862				144  13 Statutory Retirement Third-party employee plan sick pay			2000			
					emp	x			E 492		
East Morganchester ME 62964-4					14 Other (see enclosed Notice to Employee)			12c			
									104		
									12d		
									920		
f Employee's address and ZIP code  15 State Employee's state ID number 16 State wages, tips, etc. 17 State income tax						18 Local wages, tips, etc.	10 1	ocal income tax		20 Locality name	
RI			9	6811.84		1.0 =000		25500.93		,	
KI	707-69	7-323	75895.2	0011.84		201474.36	23	500.93		Jacob Fields	
IL	311-11	L-401	77079.01	6735.69		136634.85	28	679.16		Joshua Path	

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

