REISS	REISSUED a Employee's social security number				Safe, Accurate,						Visit the IRS Website				
STATE	MENT	21	9-04-0145	OMB	No. 1545-	-0008	FAST! Us	e	51	iile .	at www.i	irs.gov/efile	э.		
b Employer identification number					1	Wages, tips, other compensation				Federal income tax withheld					
71-2291689						96002.02				14796.56					
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld					
Mcdaniel and Sons Ltd						97749.64				7477.85					
34168 Jason Keys Apt. 079					5	5 Medicare wages and tips					6 Medicare tax withheld				
<u> </u>						71371.66				2069.78					
South Jocelyn SC 22913-5600					7	7 Social security tips				8 Allocated tips					
						97749.64					71371.66				
d Control number					9	Advance	EIC payment		10	Deper	ndent care b	enefits			
1000	833										283				
e Employee's first name and initial Last name				11	11 Nonqualified plans				12a See instructions for box 12						
						240				E 4417					
Sydr	ney Si	ms				13 Statutory Retirement Third-party employee plan sick pay					1				
9088 King Trail					en	npioyee	plan	sick pay		E	389				
West Williamfurt NJ 13085-9018					14	Other (see enclosed Notice to Employee)				12c					
										467					
										12d					
										277					
									-	H	377				
	Iress and ZIP code oyer's state ID nur		16 State wages, tips, etc.	17 State income tax		18 Loc	cal wages, tips, e	tc.	19 Loca	l income ta	ıx	20 Localit	y name		
MI	155-85		45671.01	2105.81			05.99		1525	7.09			Fort		
												†			
со	523-87	-846	51630.22	2263.94		107	903.67		1797	8.67		Sean	Road		

Wage and Tax

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.

5070

Department of the Treasury--Internal Revenue Service

Cut here. Keep lower portion for your records.

REISSUED a Employee's social security number							being furnish							
S	TATEMENT	21	L9-04-0145	OMB	No. 1545-0			a negligence able and you f			nction may b	e imposed o	n you if	
b Employer identification number					1	Wages, tips, other compensation				Federal income tax withheld				
71-2291689						96002.02				14796.56				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Mcdaniel and Sons Ltd						97749.64				7477.85				
34168 Jason Keys Apt. 079						5 Medicare wages and tips				6 Medicare tax withheld				
					71371.66					2069.78				
South Jocelyn SC 22913-5600						7 Social security tips				8 Allocated tips				
						97749.64				71371.66				
d Control number					9	9 Advance EIC payment				10 Dependent care benefits				
	1000833										283			
e Emplo	e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12				
						240				E 4417				
	Sydney Sims				13 Statutory Retirement Third-party				1	12b				
9088 King Trail					emp	loyee	plan	sick pay		E	389			
West Williamfurt NJ 13085-9018					<u> </u>	14 Other (see enclosed Notice to Employee)								
					14					120				
										467				
										12d				
										н	377			
f Emplo	oyee's address and ZIP co	10									3,,,			
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax	<u> </u>	18 Local	wages, tips,	etc.	19 Loc	al income to	ax	20 Localit	ty name	
MI	155-85	5-902	45671.01	2105.81		91705.99		152	57.09)	Earl	Fort		
			1.00.1.01			15-70					· 			
со	523-87	7-846	51630.22	2263.94		1079	03.67		179	78.67		Sean	Road	

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

