R	REISSUED	a Employee's socia	I security number				Safe, Accu	rate,			Visit the	IRS Webs	ite			
ST	<b>TATEMENT</b>	06	51-49-2792	OMB N	lo. 1545-0	8000	FAST! Use		· fi	ظ	at www.i	rs.gov/efile	<b>)</b> .			
<b>b</b> Employer identification number					1	1 Wages, tips, other compensation				2 Federal income tax withheld						
25-9907818						185735.58				20727.58						
c Employer's name, address, and ZIP code						3 Social security wages					4 Social security tax withheld					
Herrera Ltd PLC						206101.66				15766.78						
07088 Lee Gardens Suite 642						5 Medicare wages and tips 145517.04					6 Medicare tax withheld					
Variable d NE 22014 0076							4219.99									
Kevinstad ME 22014-9076						7 Social security tips					8 Allocated tips					
						206101.66					145517.04					
d Control number						9 Advance EIC payment 10 Dependent care benefits						enefits				
2436976											151					
e Employee's first name and initial Last name						11 Nonqualified plans				12a See instructions for box 12						
					234					D 6162						
Mike Thomas						13 Statutory Retirement Third-party employee plan sick pay										
45326 Erin Plains						X Sick pay				E 755						
East Brianberg CA 94139-8913						14 Other (see enclosed Notice to Employee)				12c						
Last Brianderg on 74137 0913						-				G 858						
										12d						
											501					
f Employee's address and ZIP code											301					
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	!	18 Local	wages, tips, e	tc. 19	9 Local inc	ome tax	:	20 Locality	/ name			
NM	252-88	-934	90980.55	5410.55		1818	74.44	3	6812	. 64		Karla	Locks			
		_										Ī				
CT	103-77	-467	84925.84	3673.66		1960	15.24	3	2860	. 82		Daniel	Crest			

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.

REISSUED	a Employee's socia	al security number					s being furnis								
<b>STATEMENT</b> 061-49-2792 OMB N							, a negligence able and you			sanction r	may be imp	posea or	n you if		
b Employer identification number					Wages, tips,	other comp	ensation		2 Federal income tax withheld						
25-9907818					185735.58				20727.58						
c Employer's name, address, and ZIP code					3 Social security wages					4 Social security tax withheld					
Herrera Ltd PLC					206101.66				15766.78						
07088 Lee Gardens Suite 642					5 Medicare wages and tips				6 Medicare tax withheld						
Wassi makad		145517.04 7 Social security tips					4219.99 8 Allocated tips								
Kevinstad															
	206101.66					145517.04									
d Control number	9 Advance EIC payment 10 Dependent care benefits														
2436976										15	51				
e Employee's first name and initial Last name  Mike Thomas					11 Nonqualified plans				12a See instructions for box 12						
					234				D 6162						
Mike Th		13 Statutory Retirement Third-party employee plan sick pay				1	l2b	1							
45326 Eri	14 Other (see enclosed Notice to Employee)					E	E 755								
East Bria					ree) 1	12c									
						G	858								
					1	12d									
							50	)1							
f Employee's address and ZIP c	ode									•					
15 State Employer's state ID	number	16 State wages, tips, etc.	17 State income tax		18 Local	wages, tips,	etc.	19 Loc	al income	e tax	20	Locality	/ name		
NM 252-8	8-934	90980.55	5410.55		1818	74.44		368	12.6	4	Ka	arla	Locks		
CT 103-7	7-467	84925.84	3673.66		1960	15.24		328	60.8	2	Da	niel	Crest		

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

