R	REISSUED	a Employee's socia	ll security number			Safe, A	Accurate,	e~fil	Visit the	e IRS Website		
ST	TATEMENT	48	88-20-5342	OMB N	o. 1545-00	008 FAST!	Use	G [→] IIII	at www	.irs.gov/efile.		
b Employer identification number					1 \	1 Wages, tips, other compensation			2 Federal income tax withheld			
44-0012868					212188.38			34	34138.91			
c Emplo	yer's name, address, and 2	ZIP code			3 Social security wages			4 8	4 Social security tax withheld			
Lee-Griffin PLC					166187.57			12	12713.35			
08752 Richard Station Apt. 002					5 Medicare wages and tips			6 N				
Emilyland WI 35013-9420					200740.8				5821.48			
Emiliyiand Wi 33013-9420					7 Social security tips			8 A	8 Allocated tips			
					166187.57				200740.8			
d Contro					9 Advance EIC payment			10	10 Dependent care benefits			
	3500603								187			
e Emplo	yee's first name and initial	Last name		•	11 Nonqualified plans			12a S	12a See instructions for box 12			
					139				P 3447			
Abigail Wagner					13 Statutory Retirement Third-party employee plan sick pay			12b	i			
120 Daniel Drive								334				
	Leslieview IA 02194-8085				14 Other (see enclosed Notice to Employee)			ree) 12c	i			
Legileview IA 02174 0003								529				
							12d	12d				
									640			
f Employee's address and ZIP code												
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wages, t	ips, etc.	19 Local inco	me tax	20 Locality name		
IN	018-24	-945	110753.1	5625.72		271556.11 22		22906.	37	Gonzales Skyway		
мт	204-31	-374	103198.24	5580.55		235965.7	17	41795.	34	Riley Court		

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

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.

Cut here. Keep lower portion for your records.

F	REISSUED a Employee's social security number This information is being furnished to the Internal Revenue Service. If you are required.									
S	TATEMENT	48	88-20-5342	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					Wages, tips, other compensation			2 Federal income tax withheld		
44-0012868					212188.38			34138.91		
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld		
Lee-Griffin PLC					166187.57			12713.35		
08752 Richard Station Apt. 002 Emilyland WI 35013-9420					5 Medicare wages and tips			6 Medicare tax withheld		
					200740.8 7 Social security tips			5821.48 8 Allocated tips		
d Control number					9 Advance EIC payment			10 Dependent care benefits		
	3500603							187		
e Emplo	oyee's first name and initial	Last name)		11 Nonqualified plans			12a See instructions for box 12		
Abigail Wagner				139 13 Statutory Retirement Third-party			P 3447			
	120 Daniel Drive				employee plan sick pay			~	334	
Leslieview IA 02194-8085					14 Other (see enclosed Notice to Employee)			12c		
								529		
								12d		
								640		
f Employee's address and ZIP code					10 Leaders for the	40.1	ocal income tax		00 1	
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	_			20 Locality name
IN	018-24	-945	110753.1	5625.72		271556.11	22	906.37		Gonzales Skyway
МТ	204-31	374	103198.24	5580.55		235965.77	41	795.34		Riley Court

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

