

OMB No. 1545-0008

## REISSUED STATEMENT

|   |                                   |                                |
|---|-----------------------------------|--------------------------------|
| d Control Number  | 1 Wages, tips, other compensation | 2 Federal income tax withheld  |
| b Employer identification number (EIN)<br>52-2010575  | 3 Social security wages           | 4 Social security tax withheld |
| a Employee's social security number<br>606-05-4563  | 5 Medicare wages and tips         | 6 Medicare tax withheld        |
| c Employer's name, address and ZIP code<br>TEKSYSTEMS, INC.<br>7437 RACE ROAD<br>HANOVER MD 21076 |                                   |                                |

|                            |                       |                                 |
|----------------------------|-----------------------|---------------------------------|
| 7 Social security tips     | 8 Allocated tips      | 9                               |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a See instructions for box 12 |
| 12b Code                   | 12c Code              | 12d Code                        |
| 13 Statutory employee      | Retirement plan       | Third-party sick pay            |
| 14 Other ORSTTT            |                       |                                 |

e Employee's name, address and ZIP code  
CHARLES DAVID VASQUEZ  
155 NW KINGS BLVD  
APT 647  
CORVALLIS OR 97330

2021  
Form W-2

|   |                            |
|---|----------------------------|
| 15 State Employer's state I.D. no.<br>OR 10428432 | 16 State wages, tips, etc. |
|---|----------------------------|

**Wage and Tax Statement**  
**Copy C - For EMPLOYEE'S**  
**RECORDS (See Notice to**  
**Employee on back of Copy B.)**

This information is being furnished to the Internal Revenue Service. If you are required 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.

Department of the Treasury -  
Internal Revenue Service

|                     |                            |
|---------------------|----------------------------|
| 17 State income tax | 18 Local wages, tips, etc. |
| 19 Local income tax | 20 Locality name           |

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