REISSUED a Employee's social security number					Safe, A	Accurate,	e 🖸	.∠H		Visit the	IRS Website			
S	TATEMENT	12	21-20-5864	OM	B No. 1545-00	08 FAST!	Use	G	√fi	9	at www.i	rs.gov/efile.		
b Employer identification number						1 Wages, tips, other compensation				2 Federal income tax withheld				
02-2278823						63648.76			9467.13					
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Valenzuela Group and Sons						45406.6				3473.6				
53132 Lisa Station						5 Medicare wages and tips				6 Medicare tax withheld				
						60806.04				1763.38				
East Charles VT 18706-3443					7 8	7 Social security tips				8 Allocated tips				
						45406.6				60806.04				
d Control number						9 Advance EIC payment			10 Dependent care benefits					
1384777										156				
e Employee's first name and initial Last name						11 Nonqualified plans				12a See instructions for box 12				
William Merritt						258				н 6970				
						13 Statutory Retirement Third-party				12b				
51337 Miller Manors						yee plan	sick pay			P	194			
North Diana LA 66064-7769						Other (see enclosed Notice to Employee)					i			
										G	734	734		
										12d				
										н 730				
f Employee's address and ZIP code								-			730			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income t	tax	18 Local wages, ti	ips, etc.	19 L	ocal inc	ome tax	:	20 Locality name		
VA	997-09	-791	32412.69	3041.74		68120.08 12		12	.2472.69		Tran Field:			
NM	413-41	-491	29847.16	2553.93		52640.41 74		74	483.6			Wilson Walks		
Wage and Tax						Department of the TreasuryInternal Revenue Service								
Statement CUL							Departi		יינווט ו	reasu	iy -111161116	A INCVENIUE DEIVICE		

Statement Form W-2 Copy B--To Be Filed with Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.

R	REISSUED a Employee's social security number This information is being furnished to the Internal Revenue Service. If you a												
SI	TATEMENT 121-20-5864 OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction may be imposed on you this income is taxable and you fail to report it.									on you if			
b Employer identification number					1 V	/ages, tips, other compensation		2 Federal income tax withheld					
02-2278823					63648.76			9467.13					
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld				
Valenzuela Group and Sons					45406.6			3473.6					
53132 Lisa Station East Charles VT 18706-3443					5 N	ledicare wages and tips		6 Medicare tax withheld					
						60806.04		1763.38					
					7 Social security tips			8 Allocated tips					
						45406.6		60806.04					
d Control number					9 Advance EIC payment			10 Dependent care benefits					
1384777									156				
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12					
					258			н 6970					
'	William Merritt					ory Retirement Third-party		12b					
51337 Miller Manors North Diana LA 66064-7769					employee plan sick pay			D	P 194				
					14 Other (see enclosed Notice to Employee)			12c					
					14 Other (see enclosed Notice to Employee)			120					
								G 734					
								12d					
								н 730					
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, tips, etc. 19		ocal income tax	20 Locality name				
VA	997-09	-791	32412.69	3041.74		68120.08	124	472.69		Tran	Fields		
NM	413-41	-491	29847.16	2553.93		52640.41	748	33.6		Wilso	n Walks		

Cut here. Keep lower portion for your records.

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

