REISSUE	REISSUED a Employee's social security number			Safe, Accurate,				Visit the IRS Website			
STATEME	NT 63	L4-09-7439	OMB N	o. 1545-0	DOS FAST! Use		~file	at www.ir	s.gov/efile.		
<b>b</b> Employer identificati	on number			1 \	1 Wages, tips, other compensation			2 Federal income tax withheld			
31-122	:5757				123853.91			16844.28			
c Employer's name, a	c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Werner-Burke and Sons				133995.34			10250.64				
34189 Cooper Square Suite 500				5 Medicare wages and tips			6 Medicare tax withheld				
				151354.21			4389.27				
New Kellyberg OK 18948-4384				7 Social security tips			8 Allocated tips				
				133995.34			151354.21				
d Control number				9 Advance EIC payment			10 Dependent care benefits				
9803817							146				
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
_ ,				298			D 7571				
John Moss			13 Statutory Retirement Third-party employee plan sick pay			12b	1				
80934 Nicole Extensions				X Start Park			G 716				
Johnsshire WA 08923-2155				14 Other (see enclosed Notice to Employee)			12c	i			
							D	202			
							12d				
							E	471			
f Employee's address	and ZIP code										
15 State Employer	s state ID number	16 State wages, tips, etc.	17 State income tax	•	18 Local wages, tips, etc.	19	Local income tax		20 Locality name		
LA (	74-25-553	58917.27	7066.37	110692.0		9479.55		Stout Branch			
IA 6	80-45-529	64153.61	7040.21		90375.67	18	8387.26		James Mountain		

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.

F	REISSUED	a Employee's soci	•		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						
	TATEMENT	6	14-09-7439	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.						
<b>b</b> Emplo	yer identification number				1 Wages, tips, other compensation			Federal income tax withheld			
31-1225757				123853.91			16844.28				
<b>c</b> Emplo	c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Werner-Burke and Sons				133995.34			10250.64				
34189 Cooper Square Suite 500 New Kellyberg OK 18948-4384				5 Medicare wages and tips 151354.21			6 Medicare tax withheld 4389.27				
											7 Social security tips
				133995.34			151354.21				
				d Contro	d Control number				9 Advance EIC payment		
	9803817							146			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
John Moss				298			D 7571				
	bomi Moss				13 Statu empl			12b		Ī	
80934 Nicole Extensions				X				G 716			
Johnsshire WA 08923-2155				14 Other (see enclosed Notice to Employee)			12c				
								D 202			
						İ	12d				
									E	471	
f Employee's address and ZIP code					T					1	
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		_ocal inc			20 Locality name
LA	074-25	5-553	58917.27	7066.37		110692.0	19	479	. 55		Stout Branch
IA	680-45	5-529	64153.61	7040.21		90375.67	18	387	.26		James Mountain

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

