REISSUED a Employee's social security number			Safe, Accurate, Visit the IRS Website						
STATEMENT 061-7	4-3844	OMB No. 154	5-0008 FAST!	Use	# file	at www.irs.gov/efile.			
b Employer identification number		1	Wages, tips, other con	npensation	2 Federa	al income tax withheld			
99-9301354			205321.4	6	4233	42333.53			
c Employer's name, address, and ZIP code			Social security wages		4 Social	4 Social security tax withheld			
Harris, Wu and Phillips Ltd			202148.2			15464.34			
68729 Sloan Junction Suite 353			Medicare wages and to	•	6 Medica				
			264705.9	7		7676.47			
Perezfurt AR 94828-5236			Social security tips		8 Allocat	8 Allocated tips			
			202148.2	5		264705.97			
d Control number			Advance EIC payment	İ	10 Dependent care benefits				
1906625					285				
e Employee's first name and initial Last name			Nonqualified plans		12a See in	12a See instructions for box 12			
,			229		G	G 9010			
Vanessa Kirk			Statutory Retirement employee plan	Third-party sick pay	12b	1			
477 Cory Keys			X plan	SICK Pay		931			
West Michaelburgh AL 14350-9499			Other (see enclosed N	lotice to Employee	e) 12c	1			
West Michaelburgh An 14550 5455						148			
						12d			
						001			
						281			
f Employee's address and ZIP code 15 State Employer's state ID number 16 State		e income tax	40 1 1: 1:-	[4	19 Local income ta				
			18 Local wages, tip	.,		,			
OR 014-99-933 111	.635.94 957	7.99	230901.8	<u> </u>	25569.78	Rivera Trail			
GA 755-40-771 939	948.6 7152	2.25	162593.9	8 2	22008.92	Cathy Trail			

Wage and Tax
Form W-2 Statement

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					ed to the Internal Re			
STATEMENT	00	51-74-3844	0	OMB No. 1545-0008 to file a tax return, a negligence penalty or other sanction methics income is taxable and you fail to report it.				nction may be	e imposed or	ı you if
b Employer identification number			1 V	, , , , , , , , , , , , , , , , , , ,			2 Federal income tax withheld			
99-9301354				205321.46			42333.53			
c Employer's name, address, and ZIP code			3 8	3 Social security wages			4 Social security tax withheld			
Harris, Wu and Phillips Ltd				202148.25			15464.34			
68729 Sloan Junction Suite 353			5 N				6 Medicare tax withheld			
Dono-front ND 04020 5226				264705.97			7676.47			
Perezfurt AR 94828-5236			7 8	7 Social security tips			8 Allocated tips			
				202148.25			264705.97			
d Control number			9 A	9 Advance EIC payment			10 Dependent care benefits			
1906625							285			
e Employee's first name and initial Last name			11 N	11 Nonqualified plans			12a See instructions for box 12			
				229			G 9010			
Vanessa Kirk				13 Statutory Retirement Third-party						
477 Cory Keys				employee plan sick pay			931			
West Michaelburgh AL 14350-9499				14 (14 Other (see enclosed Notice to Employee)			12c		
mese interactions in 11330 3133				148						
				12d						
								001		
							281			
f Employee's address and ZIP co		16 State wages, tips, etc.	17 State income	o tay	18 Local wages, tips	oto 1	19 Local income ta	v	20 Locality	, namo
1 .,		=								
OR 014-9	y-y33	111635.94	9577.99	2	230901.81		25569.78		Rivera	Trail
GA 755-4	0-771	93948.6	7152.25	5	162593.98	2	22008.92		Cathy	Trail

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

