REISSUED a Employee's socia	•		Safe, Accurate, Visit the IRS Website					IRS Website			
STATEMENT 53	36-93-9326	OMB No	o. 1545-00	008 FAST	! Use	<i>G</i>	file	at www.i	rs.gov/efile.		
b Employer identification number			1 V	Vages, tips, other o	compensation		2 Federa	I income tax	c withheld		
82-4064182				157070.83				37579.09			
c Employer's name, address, and ZIP code				3 Social security wages				4 Social security tax withheld			
Rangel, Wiggins and Ortega Ltd			135198.88				10342.71				
3460 Stevenson Islands			5 Medicare wages and tips				6 Medicare tax withheld				
Sarahbury WY 01038-0096			153972.01				4465.19				
Sarahbury WY 01038-0096				7 Social security tips				8 Allocated tips			
				135198.				1539	72.01		
d Control number			9 A	dvance EIC paym	ent	10	0 Depen	dent care be	enefits		
7029938								280			
e Employee's first name and initial Last name	Э		11 N	lonqualified plans		1	2a See in	structions	for box 12		
			276				E 5249				
Amy Cline			13 Statu			1	2b				
8632 Mcclure Curve Gailfort NJ 47117-3789			employee plan sick pay 14 Other (see enclosed Notice to Employee)				P	293			
						yee) 1	2c	i			
Galifold No. 47117 3703							D	397			
						1	2d				
								963			
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 Loca	al income ta	x	20 Locality name		
MO 477-24-625	80003.05	4645.07		168168.	46	217	73.31		Baldwin Place		
IN 383-61-689	71785.9	5065.9		120405.	61	276	59.22		Deborah Union		

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.

REISSUI	ED a	Employee's social	security number		This information is being furnished to the Internal Revenue Service. If you are required						
STATEME		53	6-93-9326	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	b Employer identification number			Wages, tips, other compensation			2 Federal income tax withheld				
82-4064182				157070.83			37579.09				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Rangel, Wiggins and Ortega Ltd				135198.88			10342.71				
3460 Stevenson Islands			5 Medicare wages and tips			6 Medicare tax withheld					
Sarahbury WY 01038-0096				153972.01		4465.19					
			7 Social security tips			8 Allocated tips					
					135198.88		153972.01				
d Control number				9 Advance EIC payment			10 Dependent care benefits				
7029938							280				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
				276			E 5249				
Amy Cline			13 Statutory Retirement Third-party			12b					
8632 Mcclure Curve				emple	pyee plan sick pay		P	293			
			14 Other (see enclosed Notice to Employee)			12c					
Gailfort NJ 47117-3789						5 207					
						D 397					
								12d	ı		
							963				
f Employee's addres				T -							
' '	r's state ID num		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	_	ocal income		20 Locality name	
MO	477-24-	-625	80003.05	4645.07		168168.46	21	773.3	1	Baldwin Place	
IN	383-61-	-689	71785.9	5065.9		120405.61	27	659.2	2	Deborah Union	

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

