anadrol

053.314.328-40 Identificação

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CREDIT CARD STATEMENT

Wells Fargo

SEND PAYMENT TO:

1015 EAST BOBBY COURT

MILLERSVILLE, MISSOURI - 37072

Social Security Number 098-32-5068

Name Alex Smith

ACCOUNT NUMBER NAME STATEMENT DATE PAYMENT DUE DATE

0987-527-810 Alex Smith 10/01/2015 11/07/2015

CREDIT LIMIT CREDIT AVAILABLE NEW BALANCE MINIMUM PAYMENT

$5,000.00 3,477.98 $1,522.02 $69.87

This Month’s Activity:

TRANSACTION DATE

POST DATE

TRANSACTION DESCRIPTION

AMOUNT

09/05/2015

09/07/2015

Safeway

101.01

-----BEGIN CERTIFICATE REQUEST-----

MIIByzCCATQCAQAwYjELMAkGA1UEBhMCVVMxETAPBgNVBAgTCE5ldyBZb3JrMRUw

EwYDVQQHEwxQb3VnaGtlZXBzaWUxDDAKBgNVBAoTA0lCTTEMMAoGA1UECxMDVFBG

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2Dr/nkoZRzpHMv5mUtbbKYZZFr6nivk5pl8Bzhd6jZ4hithMN+VzjH42JwCz7Bp+

eR5ARlXmQsq13WmXirAIKuy1DaBW50iOekJJUnYLCg==

-----END CERTIFICATE REQUEST-----Form 1099-R

OMB No. 1545-0115

2016

PAYER’S name, street address, city or town, state or province, country, ZIP

or foreign postal code, and telephone no :

Z Builders

934 Cobblestone Court, Kingston, New York 12401

PAYER’S federal identification number : 846-6220742

RECIPIENT’S identification number : 846-6221234

RECIPIENT’S name : ALex Smith

Street address (including apt. no.) : 10th Floor, 100 South Main Street

City or town, state or province, country, and ZIP or foreign postal code :

Los Angeles, California 90012

Account number (see instructions) : 1284930494

FATCA filing 2nd TIN not. 13 Excess golden parachute

requirement

1 Rents : $ 1200.00

2 Royalties : $ 500.00

3 Other income : $ 1000.00

4 Federal income tax withheld : 230.00

5 Fishing boat proceeds : 900.00

6 Medical and health care payments : $ 560.00

7 Nonemployee compensation

8 Substitute payments in lieu of dividends or interest : $ 100.00

9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale

10 Crop insurance proceeds : $ 100.00

13 Excess golden parachute payments $ 100.00

14 Gross proceeds paid to an attorney $ 600

15a Section 409A deferrals

15b Section 409A income

15b Section 409A income

16 State tax withheld

17 State/Payer’s state no. PA 3333333

18 State Income 4,567.00

Form 1099-MISC www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service