a Employee's social security number 182-06-6681		OMB No. 154	OMB No. 1545-0008  This information is being furnished to the Internal Revenu are required to file a tax return, a negligence penalty or of may be imposed on you if this income is taxable and you					ne Service. If you ther sanction fail to report it.			
b Employer identification number (EIN)					Vages, tips,	other compensation	2	Federa	al income ta	ax withheld	
06-0020123						10569	4			25366	
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Gundaker Commercial Group					112440			0 6971			
5901 Del Lago Circle					Medicare w	vages and tips	6 Medicare tax withheld				
Sunrise FL 33313						11244	1630				
					7 Social security tips			8 Allocated tips			
d Control number					9			10 Dependent care benefits			
<b>e</b> Employee's first name and initial Last name Suff.				11 Nonqualified plans			l c	<b>12a</b> See instructions for box 12			
Chloe		Armitage	Armitage				d e	F		13493	
				13	Statutory employee	Retirement Third-party sick pay	12I	ָ נ			
1801 S 2nd St.							o d e				
McAllen TX 78503				14 Other			120	٠ .			
							d e				
								12d			
								o d e			
f Employee's address and ZIP code											
' '	's state ID number	16 State wages, tips, etc.	17 State incon	ne tax	18 Loc	cal wages, tips, etc.	<b>19</b> Lo	ocal inco	ome tax	20 Locality nam	
DE	00-0-196	9 112440	) <u> </u> 	56	22						

Form **W-2** Wage and Tax Statement



Department of the Treasury-Internal Revenue Service

Safe, accurate, FAST! Use



Copy C—For EMPLOYEE'S RECORDS (See *Notice to Employee* on the back of Copy B.)