La Faultina de la constitución d		
2222 Void 528-23-1112	OMB No. 1545-0008	- - - - - -
b Employer identification number (EIN)	1 Wages, tips, other compensation	2 Federal income tax withheld
870300600	23,808.89	2.280.71
c Employer's name, address, and ZIP code	3 Social security wages	4 Social security tax withheld
REDMAN VAN & STORAGE		1
2571 WEST 2500 SOUTH	25,108.89	1,054.57
2571 WEST 2590 SOUTH SALT LAKE CITY, UT 84119	5 Medicare wages and tips	6 Medicare tax withheld
SALT LAKE CITY, UT 84119	25,108.89	364.08
	7 Social security tips	8 Allocated tips
d Control number	9	10 Dependent care benefits
62		
e Employee's name, address, city, and ZIP code	11 Nonqualified plans	12a See instructions for box 12
ARNOLD G. MORRIS		₿ D   1.300.00
110111(12)	13 Statutory Retirement Third-party	12b
3334 S 3200 W	employee plan sick pay	c a
3334 S 3200 W WVC, UT 84119	14 Other	12c
WVC, 01 04113	14 Othor	C
		• W 1 1.000.40
		12d
		d e
15 State Employer's state ID number 16 State wages tips at a		<b>上</b>
To Otate wages, tips, etc.		9 Local income tax 20 Locality name
UT   12289446004WTH   23,808.89	984.47	

Form W-2 Wage and Tax
Statement
Copy 1—For State, City, or Local Tax Department
Copy D—For Employer.

5017

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Act Notice, see back of Copy D.

LW2D1

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