

|                                                                                                                      |  |                                         |  |                                                                                                                                          |  |                                            |  |
|----------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------|--|
| 22222                                                                                                                |  | Void <input type="checkbox"/>           |  | a Employee's social security number<br>529-83-5232                                                                                       |  | OMB No. 1545-0008                          |  |
| b Employer identification number (EIN)<br>870300600                                                                  |  |                                         |  | 1 Wages, tips, other compensation<br>22,478.51                                                                                           |  | 2 Federal income tax withheld<br>909.21    |  |
| c Employer's name, address, and ZIP code<br>REDMAN VAN & STORAGE<br>2571 WEST 2590 SOUTH<br>SALT LAKE CITY, UT 84119 |  |                                         |  | 3 Social security wages<br>22,478.51                                                                                                     |  | 4 Social security tax withheld<br>1,393.67 |  |
|                                                                                                                      |  |                                         |  | 5 Medicare wages and tips<br>22,478.51                                                                                                   |  | 6 Medicare tax withheld<br>325.94          |  |
|                                                                                                                      |  |                                         |  | 7 Social security tips                                                                                                                   |  | 8 Allocated tips                           |  |
| d Control number<br>53                                                                                               |  |                                         |  | 9 Advance EIC payment                                                                                                                    |  | 10 Dependent care benefits                 |  |
| e Employee's name, address, city and ZIP code<br>HOLLY A. MONTOYA<br>110 WEST PARK STREET<br>COPPERTON, UT 84006     |  |                                         |  | 11 Nonqualified plans                                                                                                                    |  | 12a See instructions for box 12            |  |
|                                                                                                                      |  |                                         |  | 13 Statutory employee Retirement plan Third-party sick pay<br><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  | 12b                                        |  |
|                                                                                                                      |  |                                         |  | 14 Other<br>125 270.64                                                                                                                   |  | 12c                                        |  |
|                                                                                                                      |  |                                         |  |                                                                                                                                          |  | 12d                                        |  |
| 15 State Employer's state ID number<br>UT W62207                                                                     |  | 16 State wages, tips, etc.<br>22,478.51 |  | 17 State income tax<br>435.49                                                                                                            |  | 18 Local wages, tips, etc.                 |  |
|                                                                                                                      |  |                                         |  |                                                                                                                                          |  | 19 Local income tax                        |  |
|                                                                                                                      |  |                                         |  |                                                                                                                                          |  | 20 Locality name                           |  |

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

**2010**

Copy 1—For State, City, or Local Tax Department  
Copy D—For Employer.

Department of the Treasury—Internal Revenue Service  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.