PPPP Void a Employee's social security num			
□ 576-96-3220	OMB No. 15	15_0008	
b Employer identification number (EIN)	10.10.10		
870300600		1 Wages, tips, other compensation	2 Federal income tax withheld
		14,494.25	272.53
c Employer's name, address, and ZIP code		3 Social security wages	
I REDMAN VAN & STORAGE			4 Social security tax withheld
REDMAN VAN & STORAGE 2571 WEST 2590 SOUTH SALT LAKE CITY, UT 84119		14,494.25	898.64
SALT LAKE CITY. UT 84119		5 Medicare wages and tips	6 Medicare tax withheld
JALI LAKE CITT, UT 84119		14,494.25	
		7 Social security tips	210.17
		. Coolar security tips	8 Allocated tips
d Control number			
20		9 Advance EIC payment	10 Dependent care benefits
			I STATE OF SOLICITES
e Employee's name, address, city and ZIP code Suff.		11 Nonqualified plans	
AITUPE I. FALANIKO	Suil.	Nonqualified plans	12a See instructions for box 12
TALANTIO			0 0
3517 W 6060 C		13 Statutory Retirement Third-party employee plan sick pay	12b
3547 W 6060 S TAYLORSVILLE, UT 84118		l n sick pay	C C
TAYLORSVILLE, UT 84118		14 Other	ě
, -, -, -, -, -, -, -, -, -, -, -, -,		14 Other	12c
			9
			12d
			c l
			d e
15 State Employer's state ID number 16 State wages, tips, et			
11T 1 1 1 COOO =	_	Telegraphic Trages, tips, etc.	De Local income tax 20 Locality name
<u>UI W62207 14,494.2</u>	5 411	.56	
Wage and Tay			

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

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Department of the Treasury-Internal Revenue Service

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LW2D1

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