	.,			
22222 Void 517-62-0811	OMB No. 1545-	0008		
b Employer identification number (EIN)		1 Wages, tips, other compensation	2 Federal	income tax withheld
L 870300600		1.348.50		74.09
c Employer's name, address, and ZIP code		3 Social security wages	4 Social	security tax withheld
REDMAN VAN & STORAGE		1.348.50		56.64
REDMAN VAN & STORAGE 2571 WEST 2590 SOUTH SALT LAKE CITY, UT 84119		5 Medicare wages and tips	6 Medicare tax withheld	
		1.348.50		19.55
		7 Social security tips	8 Allocate	
d Control number		9	10 Depend	lent care benefits
19	#2 60			
e Employee's name, address, city, and ZIP code		11 Nonqualified plans 12a See instructions for box 12		
PHILIP M. EVANS			Code	
		3 Statutory Retirement Third-party employee plan sick pay	12b	
304 WEST 13TH ST			o d	
304 WEST 13TH ST LAUREL, UT 59044		4 Other	12c	
			o d e	
			12d	
			o d e	
15 State Employer's state ID number 16 State wages, tips, etc.	17 State income	, , , , , , , , , , , , , , , , , , ,	9 Local incom	ne tax 20 Locality name
MT   736822   1,348.50	48.	85		

Form W-2 Wage and Tax Statement

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Department of the Treasury - Internal Revenue Service

For Privacy Act and Paperwork Reduction
Act Notice, see back of Copy D.

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