Copy B To Be Filed With Employee's Federal Tax Return — 2007 — OMB No. 1545-0008

a Employee's soc. sec. no. | 1 Wages, tips, other comp. | 2 Federal income tax withheld
3 Social security wages | 4 Social security tax withheld
b Employer ID number (EIN) | 5 Medicare wages and tips | 6 Medicare tax withheld
c Employer's name, address, and ZIP code
d Control number
e Employee's name, address, and ZIP code | Suff.
7 Social security tips | 8 Allocated tips | 9 Advance EIC payment
10 Dependent care benefits | 11 Nonqualified plans
12a | 13 Stat. Emp. | Ret. plan | 3rd-party sick pay
12b | 14 Other
12c
12d
15 State | Empl.'s state I.D. # | 16 State wages, tips, etc. | 17 State income tax
18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name

Form W-2 Wage and Tax Statement — Dept. of the Treasury - IRS
This information is being furnished to the Internal Revenue Service.

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return — 2007 — OMB No. 1545-0008

a Employee's soc. sec. no. | 1 Wages, tips, other comp. | 2 Federal income tax withheld
3 Social security wages | 4 Social security tax withheld
b Employer ID number (EIN) | 5 Medicare wages and tips | 6 Medicare tax withheld
c Employer's name, address, and ZIP code
d Control number
e Employee's name, address, and ZIP code | Suff.
7 Social security tips | 8 Allocated tips | 9 Advance EIC payment
10 Dependent care benefits | 11 Nonqualified plans
12a | 13 Stat. Emp. | Ret. plan | 3rd-party sick pay
12b | 14 Other
12c
12d
15 State | Empl.'s state I.D. # | 16 State wages, tips, etc. | 17 State income tax
18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name

Form W-2 Wage and Tax Statement — Dept. of the Treasury - IRS

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.) — 2007 — OMB No. 1545-0008

a Employee's soc. sec. no. | 1 Wages, tips, other comp. | 2 Federal income tax withheld
3 Social security wages | 4 Social security tax withheld
b Employer ID number (EIN) | 5 Medicare wages and tips | 6 Medicare tax withheld
c Employer's name, address, and ZIP code
d Control number
e Employee's name, address, and ZIP code | Suff.
7 Social security tips | 8 Allocated tips | 9 Advance EIC payment
10 Dependent care benefits | 11 Nonqualified plans
12a | 13 Stat. Emp. | Ret. plan | 3rd-party sick pay
12b | 14 Other
12c
12d
15 State | Empl.'s state I.D. # | 16 State wages, tips, etc. | 17 State income tax
18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name

Form W-2 Wage and Tax Statement — Dept. of the Treasury - IRS
This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return — 2007 — OMB No. 1545-0008

a Employee's soc. sec. no. | 1 Wages, tips, other comp. | 2 Federal income tax withheld
3 Social security wages | 4 Social security tax withheld
b Employer ID number (EIN) | 5 Medicare wages and tips | 6 Medicare tax withheld
c Employer's name, address, and ZIP code
d Control number
e Employee's name, address, and ZIP code | Suff.
7 Social security tips | 8 Allocated tips | 9 Advance EIC payment
10 Dependent care benefits | 11 Nonqualified plans
12a | 13 Stat. Emp. | Ret. plan | 3rd-party sick pay
12b | 14 Other
12c
12d
15 State | Empl.'s state I.D. # | 16 State wages, tips, etc. | 17 State income tax
18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name

Form W-2 Wage and Tax Statement — Dept. of the Treasury - IRS

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