b Employer's Identification number	32-0070800	12a See instructions for Box 12	1 Wages, tips, other compensation: 53456.00
c Employer's name, address, and ZIP code	RELIANCE PACIFIC INC 39111 PASEO PADRE PKWY STE 220 FREMONT CA 94538	12b	2 Federal income tax withheld: 7134.96
		12c	3 Social security wages: 53456.00
		12d	4 Social security tax withheld: 3314.27
e Employee's first name and initial	Last name: 177190		5 Medicare wages and tips: 53456.00
	SWETHA TADAKA 3939 MONROE AVE 262 FREMONT CA 94536		6 Medicare tax withheld: 775.11
			7 Social security tips
			8 Allocated tips
			9
			10 Dependent care benefits
			11 Nonqualified plans
			13 Statutory employee / Retirement plan / Third-party sick pay
			14 Other: CA SDI 534.56
f Employee's address and ZIP code		a Employee's soc. sec. no: 042-89-0631	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CA	257-1865-1	53456.00	2903.60			

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b Employer's Identification number		12a See instructions for Box 12	1 Wages, tips, other compensation
c Employer's name, address, and ZIP code		12b	2 Federal income tax withheld
		12c	3 Social security wages
		12d	4 Social security tax withheld
e Employee's first name and initial	Last name		5 Medicare wages and tips
			6 Medicare tax withheld
			7 Social security tips
			8 Allocated tips
			9
			10 Dependent care benefits
			11 Nonqualified plans
			13 Statutory employee / Retirement plan / Third-party sick pay
			14 Other
f Employee's address and ZIP code		a Employee's soc. sec. no	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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b Employer's Identification number		12a See instructions for Box 12	1 Wages, tips, other compensation
c Employer's name, address, and ZIP code		12b	2 Federal income tax withheld
		12c	3 Social security wages
		12d	4 Social security tax withheld
e Employee's first name and initial	Last name		5 Medicare wages and tips
			6 Medicare tax withheld
			7 Social security tips
			8 Allocated tips
			9
			10 Dependent care benefits
			11 Nonqualified plans
			13 Statutory employee / Retirement plan / Third-party sick pay
			14 Other
f Employee's address and ZIP code		a Employee's soc. sec. no	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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b Employer's Identification number		12a See instructions for Box 12	1 Wages, tips, other compensation
c Employer's name, address, and ZIP code		12b	2 Federal income tax withheld
		12c	3 Social security wages
		12d	4 Social security tax withheld
e Employee's first name and initial	Last name		5 Medicare wages and tips
			6 Medicare tax withheld
			7 Social security tips
			8 Allocated tips
			9
			10 Dependent care benefits
			11 Nonqualified plans
			13 Statutory employee / Retirement plan / Third-party sick pay
			14 Other
f Employee's address and ZIP code		a Employee's soc. sec. no	

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

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