

d Control number	1 Wages, tips, other compensation 709.50	2 Federal income tax withheld 3.45
OMB NO. 1545-0008	3 Social security wages	4 Social security tax withheld
	5 Medicare wages and tips	6 Medicare tax withheld

c Employer's name, address and ZIP code
STATE OF CALIFORNIA
BETTY T. YEE, CALIFORNIA STATE CONTROLLER
P.O. BOX 942850
SACRAMENTO, CA 94250-5878

7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
12b	12c	12d

b Employer identification number (EIN) **94-6001347** a Employee's social security number **072-99-0406**

13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
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e Employee's name, address and ZIP code
P J PANSHERIYA
1334 THE ALAMEDA #386
SAN JOSE CA
95126

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

2020	15 State Employer's state ID No. CA 80040397	16 State wages, tips, etc. 709.50
	Form W-2 Wage and Tax Statement Copy C - For EMPLOYEE'S RECORDS (see Notice to Employee on the back of Copy B.)	
	17 State income tax	18 Local wages, tips, etc.
	19 Local income tax	20 Locality name

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OMB NO. 1545-0008	3 Social security wages	4 Social security tax withheld
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c Employer's name, address and ZIP code
STATE OF CALIFORNIA
BETTY T. YEE, CALIFORNIA STATE CONTROLLER
P.O. BOX 942850
SACRAMENTO, CA 94250-5878

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e Employee's name, address and ZIP code
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SAN JOSE CA
95126

2020	15 State Employer's state ID No. CA 80040397	16 State wages, tips, etc. 709.50
	Form W-2 Wage and Tax Statement Copy B - To Be Filed With Employee's FEDERAL Tax Return	
	17 State income tax	18 Local wages, tips, etc.
	19 Local income tax	20 Locality name

d Control number	1 Wages, tips, other compensation 709.50	2 Federal income tax withheld 3.45
OMB NO. 1545-0008	3 Social security wages	4 Social security tax withheld
	5 Medicare wages and tips	6 Medicare tax withheld

c Employer's name, address and ZIP code
STATE OF CALIFORNIA
BETTY T. YEE, CALIFORNIA STATE CONTROLLER
P.O. BOX 942850
SACRAMENTO, CA 94250-5878

7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a
12b	12c	12d

b Employer identification number (EIN) **94-6001347** a Employee's social security number **072-99-0406**

13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
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e Employee's name, address and ZIP code
P J PANSHERIYA
1334 THE ALAMEDA #386
SAN JOSE CA
95126

2020	15 State Employer's state ID No. CA 80040397	16 State wages, tips, etc. 709.50
	Form W-2 Wage and Tax Statement Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return Department of the Treasury Internal Revenue Service	
	17 State income tax	18 Local wages, tips, etc.
	19 Local income tax	20 Locality name

d Control number	1 Wages, tips, other compensation 709.50	2 Federal income tax withheld 3.45
OMB NO. 1545-0008	3 Social security wages	4 Social security tax withheld
	5 Medicare wages and tips	6 Medicare tax withheld

c Employer's name, address and ZIP code
STATE OF CALIFORNIA
BETTY T. YEE, CALIFORNIA STATE CONTROLLER
P.O. BOX 942850
SACRAMENTO, CA 94250-5878

7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a
12b	12c	12d

b Employer identification number (EIN) **94-6001347** a Employee's social security number **072-99-0406**

13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
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e Employee's name, address and ZIP code
P J PANSHERIYA
1334 THE ALAMEDA #386
SAN JOSE CA
95126

2020	15 State Employer's state ID No. CA 80040397	16 State wages, tips, etc. 709.50
	Form W-2 Wage and Tax Statement Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return Department of the Treasury Internal Revenue Service	
	17 State income tax	18 Local wages, tips, etc.
	19 Local income tax	20 Locality name