

Employee Reference Copy Wage and Tax Statement Copy C for employee's records. Control number Corp. Employer use only

K7/FJR Employer's name, address, and ZIP code

S FORCE IT SOLUTION 5048 TENNYSON PKWY STE 250 **PLANO, TX 75024** 

Batch #91493

e/f Employee's name, address, and ZIP code

FAHAD KHAYYAM 9335 LANDING LANE **BUILDING C APT 205** DES PLAINES, IL 60016

Employer's FED ID number a Employee's SSA number 82-2702264 XXX-XX-7863 Wages, tips, other comp. Federal income tax withheld 19404.00 2672.44 3 Social security wages Social security tax withheld 5 Medicare wages and tips 6 Medicare tax withheld 8 Allocated tips 7 Social security tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 12b 14 Other 13 Stat emp. Ret. plan 3rd party sick pay 15 State Employer's state ID no. 16 State wages, tips, etc. TOTAL STATE 17 State income tax 18 Local wages, tips, etc. 928.31 19 Local income tax 20 Locality name

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

Wages, Tips, other Social Security Medicare IA. State Wages, Wages Wages Box 16 of W-2 Box 3 of W-2 Box 5 of W-2 Box 1 of W-2

Wages, tips, other comp

Medicare wages and tips

3 Social security wages

19404.00

Gross Pay 19,404.00 19,404.00 19,404.00 7,330.40 Reported W-2 Wages 19,404.00 0.00 0.00 7,330.40

2. Employee Name and Address.

FAHAD KHAYYAM 9335 LANDING LANE BUILDING C APT 205 DES PLAINES, IL 60016

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1	Wages, tips, other comp. 19404.00			2 Federal income tax withheld 2672.44		
3	3 Social security wages			4 Social security tax withheld		
5	Medicare wages and tips		6 Medicare tax withheld			
d	Control	number	Dept.	Corp.	Employer	use only
00	0061	K7/FJR			Α	20
c Employer's name, address, and ZIP code						

S FORCE IT SOLUTION LLC 5048 TENNYSON PKWY STE 250 **PLANO, TX 75024** 

b	Employer's FED ID number 82-2702264	a Employee's SSA number XXX-XX-7863			
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits			
11	Nonqualified plans	12a See instructions for box 12			
14	Other	12b			
		12c			
		12d			
		13 Stat emp. Ret. plan 3rd party sick pay			
e/f	Employee's name, address ar	nd ZIP code			

**FAHAD KHAYYAM** 9335 LANDING LANE **BUILDING C APT 205** DES PLAINES, IL 60016

15	State	Employer's state ID no. TOTAL STATE	16 State wages, tips, etc.
17	State	income tax <b>928.31</b>	18 Local wages, tips, etc.
19	Local	income tax	20 Locality name
		<u> </u>	

Federal Filing Copy Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.

1 Wages, tips, other co	2 Federal income tax withheld 2672.44			
3 Social security wages	4 Social security tax withheld 6 Medicare tax withheld			
5 Medicare wages and				
d Control number	Dept.	Corp.	Employer	use only
000061 K7/FJR			Α	20

c Employer's name, address, and ZIP code S FORCE IT SOLUTION LLC

5048 TENNYSON PKWY STE 250 PLANO, TX 75024

b	Employer's FED ID number 82-2702264	a Employee's SSA number XXX-XX-7863			
7	Social security tips	8 Allocated tips  10 Dependent care benefits			
9					
11	Nonqualified plans	12a			
14	Other	12b			
		12c			
		12d			
		13 Stat emp. Ret. plan 3rd party sick pay			

e/f Employee's name, address and ZIP code

FAHAD KHAYYAM 9335 LANDING LANE **BUILDING C APT 205** DES PLAINES, IL 60016

15 State	Employer's state ID no. 82-2702264001	. 16 State wages, tips, etc. 7330.40
17 State	income tax	18 Local wages, tips, etc.
	330.67	
19 Local	income tax	20 Locality name

IA.State Reference Wage and Tax Statement

Copy 2 to be filed with employee's State Income Tax Return.

d	Control number	Dept.	Corp.	Emplo	yer use only	
000061 K7/FJR				Α	20	
С	Employer's name, a	ddress, ar	nd ZIP cod	е		
	S FORCE IT SOLUTION LLC 5048 TENNYSON PKWY STE 250 PLANO, TX 75024					
b	Employer's FED ID number a Employee's SSA number XXX-XX-7863					
7	Social security tips		8 Allocated tips			
9			10 Dependent care benefits			
11	Nonqualified plans	***************************************	12a			
14	Other		12b			
			12c			
			12d			
			13 Stat em	p. Ret. plan	3rd party sick pay	
e/f Employee's name, address and ZIP code  FAHAD KHAYYAM  9335 LANDING LANE  BUILDING C APT 205  DES PLAINES, IL 60016						
	State Employer's s A 82-2702264	tate ID no. 4001	16 State v	vages, tip	s, etc. 7330.40	
17	State income tax		18 Local	wages, tip	os, etc.	

330.67

IA.State Filing

Copy 2 to be filed with employee's State Income Tax Return.

Wage and Tax

Statement

19 Local income tax

2 Federal income tax withheld

4 Social security tax withheld

6 Medicare tax withheld

20 Locality name

Copy

2672.44