		j [ <u>-</u> ]	1_1	The state of the s		
OMB No. 1545-0008 d Control Number	11 Wages tips ::		OMB No. 1646-0008			
	1 Wages, tips, other compensation 7513,87	Federal income tax withheld 698.03	d Control Number	1 Wages, tips, other o	compensation 2 Fed 7513.87	eral income tax withheld 698.03
62 - 1803921	7513.87	Social security tax withheld 465.86	b Employer identification number (E	EIN) 3 Social security wag		ial security tax withheld
a Employee's social security number XXX - XX - 7224	5 Medicare wages and tips 6	Medicare tax withheld	a Employee's social security number XXX - XX - 7224	er 6 Medicare wages an	7513.87	dicare tax withheld
c Employer's name, address and ZIP cod CENTURY II STAFFING 2054 VISTA PARKWAY WEST PALM BEACH FL	USA, LLC STE 300 33411		c Employer's name, address and Z CENTURY II STAFF 2054 VISTA PARKW WEST PALM BEACH	ING USA, LLC AY STE 300	,313.0/	108.95
7 Social security tips  10 Dependent care benefits	8 Allocated tips		7 Social security tips	8 Allocated tips	9	
	11 Nonqualified plans	2a	10 Dependent care benefits	11 Nonqualified plan	s 12a	1
12b	12c	2d See instructions for box 12	12b	12c	12d	See instructions for box 12
13 Statutory Retirement Third-party employee plan sick pay	14 Other NJFLI	27.24	13 Statutory Retirement Third	i-party 14 Other	8	
	NJSDI	21.04   35.37	employee plan sick	NJSDI		21.04 35.37
e Employee's name, address and ZIP cod	NJUI/WF/SWF	31.96		NJUI/WF/S	WF	31.96
REENA CHAUHAN 87 FARMINGDALE DR PARSIPPANY NJ 07054			e Employee's name, address and REENA CHAUHAN 87 FARMINGDALE D PARSIPPANY NJ 07	DR 1054		
2021 NJ 621	-803-921/000	7513.87	도미도가   <sup>N가   6</sup>	Employer's state I.D. no. 621 – 803 – 921 / (	and the second s	State wages, tips, etc. 7513.87
			. ₩-2	/		, , , , , , , , , , , , , , , , , , , ,
Copy C - For EMPLOYEE'S		ocal wages, tips, etc.	Wage and Tax Statement	17 State income tax	18 Loca	wages, tips, etc.
RECORDS (See Notice to Employee on back of Copy B.)	122.12		Copy B - To Be Filed With Employee's FEDERAL Tax		122.12	***************************************
This information is being furnished to the internal Revenue Service. If you are required to file a tai return, a regigence penalty or other sanction may be imposed on your the.	19 Local income tax 20 L	ocality name	Return.  This information is being furnished to tr Internal Revenue Service	19 Local income tax	20 Local	ity name
Income is taxable and you fail to report it.						
Internal Revenue Service			Department of the Treasury – Internal Revenue Service	31		The second second
OMB No. 1645-0008 d Control Number		2 Federal income tax withheld	OMB No. 1646-0008 d Control Number	1 Wages, tips, other	compensation 2 Fe	
b Employer identification number (EIN)	7513.87	698.03			7513.87	oderal income tax withheld 698.03
62-1803921	7513.87	465.86	b Employer identification number (i 62-1803921	EIN) 3 Social security was	ges 4 Sc 7513.87	ocial security tax withheld
a Employee's social security number XXX - XX - 7224	7513.87	6 Medicare tax withheld 108.95	a Employee's social security numb	per 5 Medicare wages a	and tips 6 M	edicare tax withheld
c Employer's name, address and ZIP con CENTURY II STAFFING	c Employer's name address and	c Employer's name, address and ZIP code CENTURY II STAFFING USA, LLC				
2054 VISTA PARKWAY WEST PALM BEACH FL  7 Social security tips	STE 300 33411		CENTURY II STAFE 2054 VISTA PARK WEST PALM BEACH	FING USA, LLC		
	8 Allocated tips	- I was a second and a second a	7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a	10 Dependent care benefits	11 Nonqualified pla	ins 12a	The state of the s
12b	12c	12d	12b	12c	120	
13 Statutory Retirement Third-party		8	13 Statutory Retirement Thi	800	8 8 0	
employee plan sick pay		21.04 35.37		rd-party 14 Other NJFLI		21.04
	NJUI/WF/SWF	31.96		NJSDI NJUI/WF/	SWF	35.37 31.96
e Employee's name, address and ZIPco REENA CHAUHAN 87 FARMINGDALE DR PARSIPPANY NJ 07054			e Employee's name, address and REENA CHAUHAN 87 FARMINGDALE PARSIPPANY NJ 0	DR		
₹ W-2 NJ 621	oyer's state I.D. no. L - 803 - 921/000	16 State wages, tips, etc. 7513.87		e Employer's state I.D. no. 621 - 803 - 921/	000	State wages, tips, etc. 7513.87
Wage and Tax Statement Copy 2 - To Be Filed With	17 State income tax 18 122.12	Local wages, tips, etc.	Wage and Tax Statement Copy 2 - To Be Filed With			I wages, tips, etc.
Employee's State, City, or Local Income Tax Return	122.12		Employee's State, City, or Local Income Tax Return	r	122.12	
	19 Local income tax 20	Locality name		19 Local income tex	20 Loca	lity name
			1			- 1
Department of the Treasury – Internal Revenue Service			Department of the Treasury			
۲۰ ۱۰			Internal Revenue Service			