Copy C For EMPLOYEE'S RECORDS (See notice on back of copy 2)

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.

These substitute W-2 Wages and Tax Statements are acceptable for filing with your Federal, State and Local Income Tax Returns. If you worked in multiple locations, or had several forms of special compensation, you may receive more than one of these documents.

All copies of by perforatio forms, includ used in box 1	ns. General in ing an expland 2 are on the o	estructions ation of the other side o	for these	odes						
REISSUED STATEMENT D. CONTROL NUMBER This information is being furnished.						1 WAGES, TIPS, OTHER COMPENSATION			2 FEDERAL INCOME TAX WITHHELD	
This information is being furnished to the Internal Revenue Service B. EMPLOYER IDENTIFICATION NUMBER			2023 OMB NO. 1545-0008 A. EMPLOYEE'S SOCIAL SECURITY NUMBER			110123.22 3 SOCIAL SECURITY WAGES			19603.81 4 SOCIAL SECURITY TAX WITHHELD	
43-2054614			534-95-2169			114823.67		7119.07		
C. EMPLOYER'S NAME, ADDRESS AND ZIP CODE FIS MANAGEMENT SERVICES LLC						5 MEDICARE WAGES AND TIPS 114823.67		1664.94		
9TH FLOOR 347 RIVERSIDE AVENUE 13 Statutory Retirement Third-Party JACKSONVILLE. FL 32202 Employee Plan Sick Pay					7 SOCIAL SECURITY TIPS			8 ALLOCATED TII		
JACKSONVILLE, FL 32202			Employee Plan Sick Pay X		9			10 DEPENDANT C	ARE BENEFITS	
E. EMPLOYEE'S FIRST NAME A AJIT C PANDI		ME	SUFF.			11 NONQUALIFIED PLANS			4700.45	
2434 N MACARTHUR BLVD					14 OTHER			W	1400.00	
APT 1418 IRVING, TX 75062								C	132.21 9263.16	
F. EMPLOYEE'S ADDRESS AND 15 STATE EMPLOYER'S ST	D ZIPCODE	16 STATE WAGE	ES, TIPS,ETC.	17 STATE INCOM	E TAX	18 LOCAL WAGES, TIPS, ETC.	19 LOCA	DD L INCOME TAX	20 LOCALITY NAME	
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IRVING, TX 75062 F. EMPLOYEE'S ADDRESS AND ZIPCODE						<u>, </u>		13 Statutory Employee	Retirement X Third-Party Sick pay	
15 STATE EMPLOYER'S STA	ATE I.D. NO.	16 STATE WAGE	S, TIPS,ETC.	17 STATE INCOME	TAX	18 LOCAL WAGES, TIPS, ETC.	19 LOCAL	INCOME TAX	20 LOCALITY NAME	
Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return Dept. of th									Internal Revenue Service	
FORM W-2 Wage and Tax Statement 2023 FOLD AND TEAR ALONG PERFORATION										
D. CONTROL NUMBER	This information is beir to the Internal Revenue	Service		IO. 1545-0008		110123.22			19603.81	
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Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return FORM W-2 Wage and Tax Statement Dept. of the Treasury - Internal Revenue Service FOLD AND TEAR ALONG PERFORATION										
D. CONTROL NUMBER	This information is being to the Internal Revenue		OMB N	O. 1545-0008	1 WAGES,	TIPS, OTHER COMPENSATION 110123.22		2 FEDERAL INCOM	E TAX WITHHELD 19603.81	
B. EMPLOYER IDENTIFICATION NUMBER 43-2054614 534-95-2169					3 SOCIAL SECURITY WAGES			4 SOCIAL SECURITY TAX WITHHELD		
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Copy B To be filed with Employee's FEDERAL tax return FORM **W-2 Wage and Tax Statement**

2023

FOLD AND TEAR ALONG PERFORATION

Dept. of the Treasury - Internal Revenue Service

CERIDIAN CER

FIS MANAGEMENT SERVICES LLC

9TH FLOOR 347 RIVERSIDE AVENUE JACKSONVILLE, FL 32202

IMPORTANT TAX DOCUMENT ENCLOSED

AJIT C PANDEY 2434 N MACARTHUR BLVD APT 1418 IRVING, TX 75062

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