Copy B, To Be Filed wi FEDERAL Tax Return.	th Employee's	OMB No. 1545-0008
a Employee's SSN	1 Wages, tips, other compensation	2 Federal income tax withheld
818-33-1698	3072.00	21.46
010-33-1030	3 Social security wages	4 Social security tax withheld
<b>b</b> Employer ID no. (EIN)	3072.00	190.46
75-2293746	5 Medicare wages and tips 3072.00	6 Medicare tax withheld 44.54
c Employer's name, addre GROVE TEMPORAR 608 W. I - 30 SUITE 421 GARLAND, TX 75 (972) 226-1234	RY SERVICES	
d Control Number		
RADHA VALA SUE 1216 HORSETAII LITTLE ELM, TX	J DR ( 75068	
7 Social security tips	8 Allocated tips	9
10 Dependent care benefit	s 11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code
Third-party sick pay		12d Code
15 State Employer's state II TX 01-821086-0	D number 16 State wages, tips, etc.	And the second of the second o
18 Local wages, tips, etc.	19 Local income tax 20 L	ocality name
	Wage and Tax Statement ad to the Internal Revenue Service.	2023 Department of the Treasury Internal Revenue Service

State, City, or Local In	th Employee's come Tax Return.	OMB No. 1545-0008
a Employee's SSN	1 Wages, tips, other compensation	2 Federal income tax withheld
	3072.00	21.46
818-33-1698	3 Social security wages	4 Social security tax withheld
b Employer ID no. (EIN)	3072.00	190.46
75-2293746	5 Medicare wages and tips 3 072 . 00	6 Medicare tax withheld 44.54
608 W. I-30 SUITE 421 GARLAND, TX 79 (972) 226-1234	5043	
d Control Number		
e Employee's first name a RADHA VALA SUI 1216 HORSETAII LITTLE ELM. T	BRAMANIAN L DR	Suff.
RADHA VALA SUI	BRAMANIAN L DR X 75068	Sun.
RADHA VALA SUI 1216 HORSETAII LITTLE ELM, T	BRAMANIAN L DR X 75068	Sun.
RADHA VALA SUI 1216 HORSETAII LITTLE ELM, TI	BRAMANIAN L DR K 75068  IZIP code  8 Allocated tips	
RADHA VALA SUI 1216 HORSETALI LITTLE ELM, T  f Employee's address and 7 Social security tips	BRAMANIAN L DR K 75068  IZIP code  8 Allocated tips	9
RADHA VALA SUI 1216 HORSETATI LITTLE ELM, To f Employee's address and 7 Social security tips 10 Dependent care benefit	BRAMANIAN L DR K 75068  ZIP code  8 Allocated tips  ts 11 Nonqualified plans	9 12a Code See inst. for box 13
RADHA VALA SUI 1216 HORSETATI LITTLE ELM, TO  f Employee's address and 7 Social security tips  10 Dependent care benefit 13 Statutory employee	BRAMANIAN L DR K 75068  ZIP code  8 Allocated tips  ts 11 Nonqualified plans	9 12a Code See inst. for box 1: 12b Code
RADHA VALA SUI 1216 HORSETATI LITTLE ELM, To f Employee's address and 7 Social security tips  10 Dependent care benefit 13 Statutory employee  Retirement plan Third-party sick pay	BRAMANIAN L DR K 75068  ZIP code  8 Allocated tips  ts 11 Nonqualified plans	9 12a Code See inst. for box 1: 12b Code 12c Code 12d Code
RADHA VALA SUI 1216 HORSETATI LITTLE ELM, To f Employee's address and 7 Social security tips  10 Dependent care benefit 13 Statutory employee  Retirement plan Third-party sick pay	BRAMANIAN L DR K 75068  ZIP code  8 Allocated tips  ts 11 Nonqualified plans  14 Other  D number 16 State wages, tips, etc.	9 12a Code See inst. for box 1: 12b Code 12c Code 12d Code 17 State income tax

Wage and Tax Statement

Form W-2

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a Employee's SSN	1 Wages, tips, other compensa	tion 2	Federal income tax withheld
818-33-1698	3072.	00	21.46
818-33-1698	3 Social security wages	4	Social security tax withheld
<b>b</b> Employer ID no. (EIN)	3072.	00	190.46
75-2293746 <b>c</b> Employer's name, addre	5 Medicare wages and tips	6	Medicare tax withheld
	3072.	00	44.54
608 W. I-30 SUITE 421 GARLAND, TX 75 (972) 226-1234			
d Control Number			
e Employee's first name an	id initial Last name		Suff.
RADHA VALA SUB	DAMANTAN		
1216 HORSETAIL			
LITTLE ELM, TX	. 75068		
LITTLE BLM, TX	. 75068		
f Employee's address and	ZIP code		
		9	
f Employee's address and . 7 Social security tips	ZIP code 8 Allocated tips		a Code Seeinst for hox 1
f Employee's address and	ZIP code 8 Allocated tips		a Code See inst. for box 1
f Employee's address and . 7 Social security tips	ZIP code 8 Allocated tips	12	a Code See inst. for box 1
f Employee's address and 7 Social security tips  10 Dependent care benefits  13 Statutory employee	ZIP code  8 Allocated tips  11 Nonqualified plans	121	b Code
f Employee's address and 7 Social security tips  10 Dependent care benefits	ZIP code  8 Allocated tips  11 Nonqualified plans	121	
f Employee's address and 7 Social security tips  10 Dependent care benefits  13 Statutory employee  Retirement plan	ZIP code  8 Allocated tips  11 Nonqualified plans	121	b Code c Code
f Employee's address and 7 Social security tips  10 Dependent care benefits  13 Statutory employee	ZIP code  8 Allocated tips  11 Nonqualified plans	121	b Code
f Employee's address and 7 Social security tips  10 Dependent care benefits  13 Statutory employee  Retirement plan  Third-party sick pay	ZIP code  8 Allocated tips  11 Nonqualified plans	12: 12: 12: 12:	b Code c Code
f Employee's address and 7 Social security tips  10 Dependent care benefits  13 Statutory employee  Retirement plan  Third-party sick pay	ZIP code  8 Allocated tips  11 Nonqualified plans  14 Other  D number 16 State wages, tips,	12: 12: 12: 12:	b Code c Code
f Employee's address and 7 Social security tips  10 Dependent care benefits  13 Statutory employee  Retirement plan  Third-party sick pay  15 State Employer's state IC  TX 01-821086-0	ZIP code  8 Allocated tips  11 Nonqualified plans  14 Other  D number 16 State wages, tips, 307	12/ 12/ 12/ 12/ 12/ 2 . 00	b Code c Code d Code
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f Employee's address and a Social security tips  10 Dependent care benefits  13 Statutory employee  Retirement plan  Third-party sick pay  15 State Employer's state IC  TX 01-821086-0  18 Local wages, tips, etc.	ZIP code  8 Allocated tips  11 Nonqualified plans  14 Other  D number 16 State wages, tips, 307	12:12:12:12:12:12:12:12:12:12:12:12:12:1	b Code c Code d Code

Copy 2, To Be Filed with Employee's OMB No. 1545-0008 State, City, or Local income Tax Return. a Employee's SSN 1 Wages, tips, other compensation 2 Federal income tax withheld 3072.00 21.46 818-33-1698 3 Social security wages 4 Social security tax withheld b Employer ID no. (EIN) 3072.00 190.46 5 Medicare wages and tips 6 Medicare tax withheld 75-2293746 3072.00 c Employer's name, address and ZIP code GROVE TEMPORARY SERVICES 608 W. I-30 SUITE 421 (972) 226-1234 d Control Number e Employee's first name and initial Last name Suff. RADHA VALA SUBRAMANIAN 1216 HORSETAIL DR LITTLE ELM, TX 75068 f Employee's address and ZIP code 7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a Code See inst. for box 12 13 Statutory employee 14 Other 12b Code Retirement plan 12c Code Third-party sick pay 12d Code 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 01-821086-0 3 3072.00 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

Wage and Tax Statement

Form W-2

Department of the Treasury -Internal Revenue Service

Department of the Treasury --

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