Copy B To Be Filed With Employee's FEDERAL Tax Return					2023	OMB No. 1545-0008		
a. Employee's SSN		ges,	tips, other comp.	2 Fe	deral income			
XXX-XX-6699		103296.00 1709						
XXX-XX-0099 	3 Soc	3 Social security wages			4 Social security tax withheld			
b. Employer ID number		103296.00			6404.35			
20-1097205	5 Med	5 Medicare wages and tips 103296.00			1497.79			
c. Employer's name, add	dress , an	d ZIP	code					
SPECTRA INF	O SYS	STE	MS, INC.					
4080 MCGINN	IS FI	ERR	Y ROAD					
SUITE 1308								
ALPHARETTA,	GA 3	300	05					
d. Control number	-							
34								
e. Employee's name, add	iress, and	d ZIP	code					
Girish Ganj	i							
4132 E Ande	rson	Dr						
Phoenix, AZ	8503	32						
				_				
7 Social security tips		8 Allocated tips						
10 Dependent care benefits		11 Nonqualified plans		1:	2a Code See	nst. for box 12		
				12.000				
13 Statutory employee	14 Othe	r		1:	2b Code			
Retirement plan				12c Code				
Third party sick pay				1	2d Code			
Till party sick pay				'	za code			
AZ 20109720	5		103296.	00		1549.44		
15 State Emplr.'s stat	e ID #	40.1	16 State wages, tips, etc.	10	17 State inco			
18 Local wages, tips,etc.		19 LC	ocai income tax	2	0 Locality name	9		
Form W-2 Wage and Ta						reasury IRS		
This information is being	ng furnisl	ned 1	to the Internal Revenue S	ervic	e.	39-1908647		
This information is hel	— ına furnis	shed t	to the IRS. If you are requir	ed to	file a tax return	n, a negligence		
penalty/other sanction ma				no a	you rail to repo	T IT.		
	YEE'S F			ne u	2023	OMB No. 1545-0008		

Copy 2 To Be Filed With Employee's State, OMB No. 2023 City, or Local Income Tax Return 1545-0008 a. Employee's SSN 1 Wages, tips, other comp 2 Federal income tax withheld 103296.00 17050.17 XXX-XX-6699 3 Social security wages 103296.00 4 Social security tax withheld 6404.35 b. Employer ID number 5 Medicare wages and tips 6 Medicare tax withheld 20-1097205 1497.79 103296.00 c. Employer's name, address, and ZIP code SPECTRA INFO SYSTEMS, INC. 4080 MCGINNIS FERRY ROAD SUITE 1308 ALPHARETTA, GA 30005 d. Control number 34 e. Employee's name, address, and ZIP code Girish Ganji 4132 E Anderson Dr Phoenix, AZ 85032 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 103296.00 201097205 1549.44 ΑZ Emplr.'s state ID# 15 State 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

Form W-2 Wage and Tax Statement

Dept. of the Treasury -- IRS 39-1908647

OMB No.

(See Notice to Employee)					2023	1545-0008		
	ployee's SSN	1 Wages, tips, other comp.			2 Federal income tax withheld			
VVV	-XX-6699		103296.00			17050.17		
AAA-AA-0099		3 Social security wages		4 Social security tax with held				
b. Employer ID number		103296.00		6404.35				
		5 Medica	re wages and tips	6 Me	dicare tax wi			
	-1097205		103296.00			1497.79		
	oloyer's name, addre							
SF	ECTRA INFO	SYSTI	EMS, INC.					
40	80 MCGINNI	S FERI	RY ROAD					
SU	JITE 1308							
ΑI	PHARETTA,	GA 300	005					
d. Cor	ntrol number							
34								
e. Em	ployee's name, addre	ss, and ZII	P code					
Ci	rish Ganji							
	.32 E Ander	~ ~ ~ D-						
			<u>C</u>					
Ph	oenix, AZ	85032						
			A.H					
7 Social security tips		87	8 Allocated tips					
10 Dependent care benefits		to 11.1	11 Nonqualified plans		12a Code See inst. for box 12			
		15 111						
13 Sta	13 Statutory employee 14 Other			12b Code				
0	italory comproyee	. 0		"				
Re	tirement plan			12	2c Code			
	thomone plan			'-	o oodo			
Third party sick pay			12d Code		2d Code			
ΑZ	201097205 103		103296.	0.0		1549.44		
	, , , , , , , , , ,							
15 State EmpIr.'s state ID#			16 State wages, tips, etc.	tc. 17 State income tax		me tax		
18 Lo	cal wages, tips, etc.	19 L	19 Local income tax		20 Locality name			
F	- M O M T	C+- +			Deat of the	T IDO		
⊢or n	n W-2 Wage and Tax	Statement	39-1908647		Dept. of the	Treasury IRS		

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	Local Income			state,		2023	OMB No. 1545-0008
a. Employe	ee's SSN		es, tips, othe	r comp. L03296.00	2 Fee	deral income t	ax withheld
XXX-XX-6699 3. Employer ID number			cial security wages 103296.00 4 Socials			cial security ta	x withheld 6404.35
b. Emproyer ib number		5 Medi	5 Medicare wages and tips 6 Medicare wages and tips			edicare tax wit	hheld
20-10	097205		1	L03296.00	1497.7		
	er's name, addres CTRA INFO			Ξ.			
4080) MCGINNIS	S FER	RY ROAI				
SUIT	TE 1308						
ALPH	HARETTA, (GA 30	005				
d. Control	number						
e. Employe	ee's name, addres	s, and ZII	P code				
Giri	ish Ganji						
4132	E Anders	son D	r				
Phoe	enix, AZ 8	35032					
7 Social security tips			8 Allocated tips				
10 Dependent care benefits		1	11 Nonqualified plans		12	2a Code See ii	nst. for box 12
13 Statutory employee 14 O					12	2b Code	
Retir	rement plan				12	2c Code	
Third party sick pay					12	2d Code	
AZ 201097205				103296.00			1549.44
	15 State Emplr.'s state ID#			16 State wages, tips, etc.			
15 State	Emplr.'s state II	D#	110 State	wages, tips, etc.			ne tax
	EmpIr.'s state II wages, tips, et c.		9 Local incor			Locality nam	
18 Local		1	9 Local incor		20	Locality nam	