Emplo	yee F	Refere	nce
N-2	Wage	and	Tax
/V -Z	State	ement	

py C for employee's	OMB No.	1545-0008		
Control number	Dept.	Сотр.	Employer A	use only

Employer's name, address, and ZIP coo PONTIS RESEARCH INC 4195 THOUSAND OAK BLVD 105 WEST LAKE VILLAGE, CA 91362

Batch #92311

f Employee's name, address, and ZIP code SRA MUNAWAR MOHAMMED 035 CLIFFROSE AVENUE IOORPARK, CA 93021-2906

Employer's FED ID number 95-4459824	a Employee's SSA number XXX-XX-3357
Wages, tips, other comp. 6250.00	2 Federal income tax withheld 730.04
Social security wages	4 Social security tax withheld
Medicare wages and tips	6 Medicare tax withheld
Social security tips	8 Allocated tips
	10 Dependent care benefits
Nonqualified plans	12a See instructions for box 12
	12b
- Other	12c
56.25 SDI	12d
	13 Stat emp Ret. plan 3rd party sick pay
State Employer's state ID n CA 402-7151 2	io. 16 State wages, tips, etc. 6250.00
State income tax 297.43	18 Local wages, tips, etc.
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 Compensation Box 1 of W-2

Social Security Wages Box 3 of W-2

Medicare Wages Box 5 of W-2

CA. State Wages, Tips, Etc. Box 16 of W-2

Gross Pay

Reported W-2 Wages

6,250.00 6,250.00

6,250.00 0.00

6,250.00 0.00

6,250.00 6.250.00

2. Employee Name and Address.

ASRA MUNAWAR MOHAMMED 4035 CLIFFROSE AVENUE MOORPARK, CA 93021-2906

O 2023 ADP, Inc

Wages, tips, other co 625	mp. 0.00	2 Federa	l income tax withheld 730.04
Social security wages		4 Social	security tax withheld
Medicare wages and	tips	6 Medica	are tax withheld
Control number	Dept.	Corp.	Employer use only

loyer's name, address, and ZIP code PONTIS RESEARCH INC 4195 THOUSAND OAK BLVD 105 WEST LAKE VILLAGE, CA 91362

Employer's FED ID number 95-4459824	a Employee's SSA number XXX-XX-3357
Social security tips	8 Allocated tips
	10 Dependent care benefits
Nonqualified plans	12a See instructions for box 12
Other	12b
56,25 SDI	12c
30.23 00.	12d
	13 Stat emp Ret. plan 3rd party sick pay

f Employee's name, address and ZIP code SRA MUNAWAR MOHAMMED 035 CLIFFROSE AVENUE IOORPARK, CA 93021-2906

State Employer's state ID no. 402-7151 2	16 State wages, tips, etc. 6250.00
State Income tax 297.43	18 Local wages, tips, etc.
Local income tax	20 Locality name

Federal Filing Copy Wage and Tax Statement

1 Wages, tips, other comp. 6250.00 3 Social security wages 5 Medicare wages and tips		2 Federa	l income tax withheld 730.04	
		4 Social security tax withheld		
		6 Medicare tax withheld		
d Control number 000015 KY/VXD	Dept.	Corp.	Employer use only	

4195 THOUSAND OAK BLVD 105 WEST LAKE VILLAGE, CA 91362

b	Employer's FED ID number 95-4459824	a Employee's SSA number XXX-XX-3357
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a
14	Other	12b
	56.25 CA SDI	12c
		12d
		13 Stat emp Ret. plan 3rd party sick pay

ASRA MUNAWAR MOHAMMED 4035 CLIFFROSE AVENUE MOORPARK, CA 93021-2906

15 State Employer's state ID no. 402-7151 2	16 State wages, tips, etc. 6250.00
17 State Income tax 297.43	18 Local wages, tips, etc.
19 Local Income tax	20 Locality name

CA.State Reference Wage and Tax Statement

Сору

1	Wages, tips, other co	0.00	2 Federa	730.04
3			4 Social security tax withheld 6 Medicare tax withheld	
5				
d 00	Control number	Dept.	Corp.	Employer use only

PONTIS RESEARCH INC 4195 THOUSAND OAK BLVD 105 WEST LAKE VILLAGE, CA 91362

b	Employer's FED ID number 95-4459824	a Employee's SSA number XXX-XX-3357
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a
14	Other	12b
1	56.25 CA SDI	12c
	38.23 CA 301	12d
		13 Stat emp. Ret. plan 3rd party sick
_		710 4

ASRA MUNAWAR MOHAMMED 4035 CLIFFROSE AVENUE MOORPARK, CA 93021-2906

15 State Employer's state ID no CA 402-7151 2	. 16 State wages, tips, etc. 6250.00
17 State Income tax 297.43	18 Local wages, tips, etc.
19 Local Income tax	20 Locality name

CA.State Filing Copy Wage and Tax Statement