Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld	
	6,660.00	548.23	
Employer identification number (EIN)	3 Social security wages	4 Social security tax withheld	
39-1929719	6,660.00	412.92	
a Employee's social security number	5 Medicare wages and tips	6 Medicare tax withheld	
XXX-XX-3558	6,660.00	96.57	

c Employer's name, address and ZIP of EXPERIS US LLC 100 MANPOWER PLACE MILWAUKEE, WI 53212

7 Social security tips		8 Allocated tips	9		
10 Dependent	care benefits	h	11 Nonqualified plans	12a	See instructions for box 12
126			12c	12d	
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other NY FLI SDI		30.30 4.20

e Employee's name, address and ZIP co MANDAR N KOLHATKAR 433 78TH STREET APT 1 BROOKLYN, NY 11209

15 Stat	te Emplo	yer's state I.D. no.			16 State wages, tips	s, etc.
NY	3919	29719				6,660.00
				•••		
		17 State income tax		18 L	Local wages, tips, etc.	
Copy C - For EMPLOYEE'S RECORDS (See Notice to			289.54	6,660.00		6,660.00
of Co	py B.)			Ī	***************************************	•••••••••
you are	required	19 Local income tax		20 1	Locality name	
sed on	you if this		214.82	NE	W YORK	
y –						
	OYEE of Co	ement OYEE'S ftice to of Copy B.) mished to the you are required ence penalty or osed on you if this all to report it.	ement OYEE'S titice to of Copy B, mished to the fyou are required rose penalty or seed on you if this all to report it.	NY 391929719 To State income tax OYEE'S tice to of Copy B. mished to the required rose penalty or seed on you if this all to report it.	NY 391929719 To State income tax OYEE'S tice to of Copy B. mished to the lyou are required rose penalty or seed on you if this all to report it.	NY 391929719 17 State income tax OYEE'S tice to of Copy B.) mished to the lyou are required from penalty or seed on you if this all to report it.

c Employer's name, address and ZIP code EXPERIS US LLC 100 MANPOWER PLACE MILWAUKEE, WI 53212

7 Social sec	urity tips		8 Allocated tips	9		
10 Depende	nt care benefit	s	11 Nonqualified plans	12a 9 0		
126			12c	12d		
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other NY FLI SDI	30.30 4.20		

e Employee's name, address and ZIP code MANDAR N KOLHATKAR 433 78TH STREET APT 1 BROOKLYN, NY 11209

2022	10 Sta	e Employers state I.D. no.	16 State wages, tips, etc.
2023	NY	391929719	6,660.00
§ W-2			
Wage and Tax State	ement	17 State income tax	18 Local wages, tips, etc.
Copy 2 - To Be Filed With		289.54	6,660.00
Employee's State, C Local Income Tax R	ity, or		
		19 Local income tax	20 Locality name
		214.82	NEW YORK
Department of the Treasury Internal Revenue Service			

Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld	
	6,660.00	548.23	
Employer identification number (EIN)	3 Social security wages	4 Social security tax withheld	
39-1929719	6,660.00	412.92	
Employee's social security number	5 Medicare wages and fips	6 Medicare tax withheld	
XXX-XX-3558	6,660.00	96.57	

c Employer's name, address and ZIP EXPERIS US LLC 100 MANPOWER PLACE MILWAUKEE, WI 53212

7 Social security tips		8 Allocated tips 9		9		
10 Dependen	t care benefits	1	11 Nonqualified plans	12a	See instructions for box 12	
12b			12c	12d		
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other NY FLI SDI		30.30 4.20	

e Employee's name, address and ZIP of MANDAR N KOLHATKAR 433 78TH STREET APT 1 BROOKLYN, NY 11209

2022 15 State Employer's state I.D. no.

2023	NY	391929719		6,660.00
₽ W-2				
Wage and Tax Sta	atement	17 State income tax 289.54	18 Local wages, tips, etc.	6,660.00
Copy B - To Be Fi Employee's FEDE Return.		x		
Neturn.		19 Local income tax	20 Locality name	
This information is being for	urnished to	the 214.82	NEW YORK	
Internal Revenue Service.			1	
Department of the Treasury	y - Internal			

16 State wages, tips, etc.

d Control Number	1 Wages, tips, other compensation	2 Federal income lax withheld
	6,660.00	548.23
b Employer identification number (EIN)	3 Social security wages	4 Social security tax withheld
39-1929719	6,660.00	412.92
a Employee's social security number	5 Medicare wages and tips	6 Medicare tax withheld
XXX-XX-3558	6,660,00	96.57

c Employer's name, address and ZIP code EXPERIS US LLC 100 MANPOWER PLACE MILWAUKEE, WI 53212

7 Social secu	rity tips		8 Allocated tips	9
10 Dependen	t care benefits		11 Nonqualified plans	12a 80
12b			12c	12d
13 Statutory employee	Retirement plan	Third-party sick pay	14 Other NY FLI SDI	30.30 4.20

e Employee's name, address and ZIP code MANDAR N KOLHATKAR 433 78TH STREET APT 1 BROOKLYN, NY 11209

0000	15 Stat	e Employ	er's state I.D. no.			16 State wages, tip	ps, etc.
2023	NY	39192	29719				6,660.00
₹ W-2				••••••			
Wage and Tax Statement Copy 2 - To Be Filed With Employee's State, City, or			17 State income tax	289.54	18 L	ocal wages, tips, et	6,660.00
Local Income Tax	Return	,	19 Local income tax	214.82		Locality name W YORK	
Department of the Treasury	-						