Copy B-To Be Filed With Employee's 41-08524' Federal Tax Return. OMB No. 1545								
	yee's soc. sec.		1 Wa	ages, tips, other comp.	2 F	ederal income tax withheld		
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20-4268567								
c Employer's name, address, and ZIP code								
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 15 State Employer's state ID number 1				16 State wages, tips. etc.		17 State income tax		
				ocal income tax	20 Locality name			
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Form W-2 Wage and Tax Statement 2023 Dept of the Treasury								

This information is being furnished to the Internal Revenue Service. DAA

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Copy C-For EMPLOYEE'S Notice to Employee on the	S RECORDS (See ne back of Copy B.)	41-0852411 OMB No. 1545-0008					
a Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax withheld					
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e Employee's name, address, and ZIP code Suff.							
MEGHANA THUBATI 2305 BAY AREA BLVD APT 2108 HOUSTON TX 77058							
7 Social security tips	8 Allocated tips	9					
10 Dependent care benefits	11 Nonqualified plans	12a Code					
13 Statutory employee 14 Othe	r	12b Code					
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15 State Employer's state ID nur	mber 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 2023 Dept. of the Treasu. This information is being furnished to the IRS. 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.

Copy 2-To Be Filed With Employee's State, 41-0852411 OMB No. 1545-0008 City, or Local Income Tax Return. 2 Federal income tax withheld 1015.85 a Employee's soc. sec. no. 1 Wages, tips, other comp. 15000.00 XXX-XX-8549 3 Social security wages 4 Social security tax withheld b Employer ID number (EIN) 5 Medicare wages and tips 6 Medicare tax withheld 20-4268567 c Employer's name, address, and ZIP code HORIZON SOFTECH, INC. 637 E BIG BEAVER RD, SUITE 101 MΙ 48083 **TROY** d Control number e Employee's name, address, and ZIP code Suff. THUBATI **MEGHANA** 2305 BAY AREA BLVD **APT 2108** HOUSTON TX 77058 7 Social security tips 8 Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a Code 12b Code 13 Statutory employee 14 Other Retirement plan 12c Code Third-party sick pay 12d Code 3000.00 121.50 20-4268567 17 State income tax 15 State Employer's state ID number 16 State wages, tips, etc 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

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Form W-2 Wage and Tax Statement

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