

Reissued statement

OMB No. 1545-0008

12/12/07 rev2

Form W-2 Wage and Tax Statement 2018		7 Social Security Tips		1 Wages, tips, other comp.		2 Federal income tax withheld	
c Employer's name, address, and ZIP code		d Control number		73698.49		9264.47	
South East Employee Leasing Sv 2739 U.S. Hwy 19 North Holiday, FL 34691		8 Allocated tips		3 Social security wages		4 Social security tax withheld	
		9 Verification code		73698.49		4569.53	
		10 Dependent care benefits		5 Medicare wages and tips		6 Medicare tax withheld	
e Employee's name, address, and ZIP code		11 Nonqualified plans		73698.49		1068.50	
		13 Statutory Employee		Retirement Plan		Third-Party Sick Pay	
		14 Other		12b -12d Codes			
		b Employer ID number		05-0591872			
a Employee's social security number		751-58-4250					
15 State CA 312-4974-1		16 State wages, tips, etc. 73698.49		17 State income tax 3661.89		18 Local wages, tips, etc. 73698.49	
				19 Local income tax 737.09		20 Locality name CA Disa	

Copy B To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service. Dept. of the Treasury -- IRS
This information is being furnished to IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable & you fail to report it.

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Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee). OMB No. 1545-0008 Dept. of the Treasury -- IRS

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Copy 2 to be filed with Employee's State, City or Local Income Tax Return OMB No. 1545-0008 Dept. of the Treasury -- IRS

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