

a Employee's social security number		OMB No. 1545-0008		Safe, accurate, FAST! Use				Visit the IRS website at <a href="http://www.irs.gov/efile">www.irs.gov/efile</a> .		
b Employer identification number (EIN)			1 Wages, tips, other compensation		2 Federal income tax withheld					
c Employer's name, address, and ZIP code			3 Social security wages		4 Social security tax withheld					
			5 Medicare wages and tips		6 Medicare tax withheld					
			7 Social security tips		8 Allocated tips					
d Control number			9 Advance EIC payment		10 Dependent care benefits					
e Employee's first name and initial	Last name		Suff.	11 Nonqualified plans		12a See instructions for box 12				
				13 Statutory employee	Retirement plan	Third-party sick pay	12b			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12c			
				14 Other		12d				
f Employee's address and ZIP code										
15 State	Employer's state ID number		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

2007

Department of the Treasury—Internal Revenue Service

Copy B—To Be Filed With Employee's FEDERAL Tax Return.  
This information is being furnished to the Internal Revenue Service.