

Copy B To Be Filed With Employee's FEDERAL Tax Return		2003		OMB No. 1545-0008	
<b>a</b> Control number	<b>1</b> Wages, tips, other comp.	<b>2</b> Federal income tax withheld		<b>3</b> Social security wages	
1 - 00000009	5400.00	542.21		5628.00	
<b>b</b> Employer ID number	<b>3</b> Social security wages	<b>4</b> Social security tax withheld		<b>5</b> Medicare wages and tips	
21-3456789	5628.00	348.96		5628.00	
<b>c</b> Employer's name, address, and ZIP code					
J & C Corporation 234 Peachtree St Atlanta, GA 30068					
<b>d</b> Employee's social security number					
345-45-6756					
<b>e</b> Employee's name, address, and ZIP code					
James Henry 3453 South Main St Atlanta, GA 30068					
<b>7</b> Social security tips		<b>8</b> Allocated tips		<b>9</b> Advance EIC payment	
<b>10</b> Dependent care benefits		<b>11</b> Nonqualified plans		<b>12a</b> Code See inst. for box	
				D 228.00	
<b>13</b> Statutory employee		<b>14</b> Other		<b>12b</b> Code	
		Health Ins (125) 72.00			
Retirement plan				<b>12c</b> Code	
X					
Third-party sick pay				<b>12d</b> Code	
GA	254-GH54545	5400.00	254.52		
<b>15</b> State Employer's state ID number		<b>16</b> State wages, tips,		<b>17</b> State income tax	
<b>18</b> Local wages, tips, etc		<b>19</b> Local income tax		<b>20</b> Locality name	

Form W-2 Wage and Tax Statement Dept. of the Treasury -- IRS 39-1908647  
This information is being furnished to the Internal Revenue Service.

Copy 2 To Be Filed With Employee's State, City or Local Income Tax Return.		2003		OMB No. 1545-0008	
<b>a</b> Control number	<b>1</b> Wages, tips, other comp.	<b>2</b> Federal income tax withheld		<b>3</b> Social security wages	
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X					
Third-party sick pay				<b>12d</b> Code	
GA	254-GH54545	5400.00	254.52		
<b>15</b> State Employer's state ID number		<b>16</b> State wages, tips, etc.		<b>17</b> State income tax	
<b>18</b> Local wages, tips, etc		<b>19</b> Local income tax		<b>20</b> Locality name	

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		Health Ins (125) 72.00			
Retirement plan				<b>12c</b> Code	
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GA	254-GH54545	5400.00	254.52		
<b>15</b> State Employer's state ID number		<b>16</b> State wages, tips, etc.		<b>17</b> State income tax	
<b>18</b> Local wages, tips, etc		<b>19</b> Local income tax		<b>20</b> Locality name	

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Form W-2 Wage and Tax Statement Dept. of the Treasury -- IRS  
BW24UP 82635 NTF 35476 39-1908647

Copy B To Be Filed With Employee's FEDERAL Tax Return			2003	OMB No. 1545-0008
a Control number	1 Wages, tips, other comp.	2 Federal income tax withheld		
2 - 00000007	2592.00	249.83		
b Employer ID number	3 Social security wages	4 Social security tax withheld		
21-3456789	2592.00	160.68		
	5 Medicare wages and tips	6 Medicare tax withheld		
	2592.00	37.56		
c Employer's name, address, and ZIP code J & C Corporation 234 Peachtree St Atlanta, GA 30068				
d Employee's social security number 345-46-5456				
e Employee's name, address, and ZIP code John Hill 3454 Lakeside Dr Atlanta, GA 30068				
7 Social security tips	8 Allocated tips	9 Advance EIC payment		
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box		
13 Statutory employee	14 Other	12b Code		
Retirement plan	Health Ins (125) 108.00	12c Code		
Third-party sick pay		12d Code		
GA	254-GH54545	2592.00	99.00	
15 State Employer's state ID number	16 State wages, tips,	17 State income tax		
18 Local wages, tips, etc	19 Local income tax	20 Locality name		

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