55555		a Em	ployee's social security number			Use Only ► 545-0008								
b Employer identification number (EIN)						1 Wages, tips, other compensation				2	2 Federal income tax withheld			
c Employer's name, address, and ZIP code						3 Social security wages				4	4 Social security tax withheld			
						5	Medi	care w	ages and	l tips	6	Medic	are tax with	hheld
						7	Socia	al secu	rity tips		8	Alloca	ated tips	
d Control number							10 Dependent				ndent care	benefits		
e Employee's first name and initial Last name						11	11 Nonqualified plans 12a See instructi				nstructions	for box 12		
		<u>I</u> .				13	Statuto	ry l	Retirement plan	Third-party sick pay	-)		
							14 Other				120	12c		
											• 120	1		
f Employee's add	ress and ZIP code	Э												
15 State Employer	r's state ID number		16 State wages, tips, etc.		17 State incon		× .	18 Local wages, tips, etc. 1			19 Lo	19 Local income tax		20 Locality name
			Statement	2	0		3		De	Fo	r Privad	cy Act	and Paper	Revenue Servic work Reductio
			tration. Send this entire page istration; photocopies are not Do Not Cut, Fold,	t accepta			41-0	85241 ⁻				-,		

222	222		a En	nployee's social security number	For Official Use Only ► OMB No. 1545-0008							
b Employer identification number (EIN)							1 Wa	ges, tips, other compensation	2 Fede	2 Federal income tax withheld		
c Employer's name, address, and ZIP code							3 So	cial security wages	4 Soci	4 Social security tax withheld		
							5 Me	dicare wages and tips	6 Med	care tax wit	hheld	
							7 So	cial security tips	8 Alloc	ated tips		
d Control number							9		10 Dependent care benefits			
e Emplo	oyee's first	name and initial		Last name Suff.			11 No	nqualified plans	12a See instructions for box 12			
						L	13 Stat emp	utory Retirement Third-party loyee plan sick pay	12b			
								er	12c			
									12d			
f Emplo	yee's addr	ress and ZIP cod	е									
15 State	5 State Employer's state ID nu		ID number16 State wages, tips, etc.		17 State inco		ne tax 18 Local wages, tips, et		19 Local income tax 20 L		20 Locality name	
L								+			+	
				x Statement			23	Fo	r Privacy Ac	and Paper	Revenue Service work Reduction	

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