

OMB# 1545-0008

COPY 2 - To Be Filed With Employee's State, City, or Local Income Tax Return

1 Wages, tips, other compensation 24000.03		2 Federal income tax withheld 669.99	
3 Social security wages 24000.03		4 Social security tax withheld 1488.00	
a Employee's social security number 594-94-8342	5 Medicare wages and tips 24000.03	6 Medicare tax withheld 348.00	
c Employer's name, address, and ZIP code DOM LAW, PA 1814 N 15TH ST TAMPA FL 33605			
e Employee's name DOMENICK G LAZZARA 5805 S. HUBERT AVE. TAMPA FL 33616			
f Employee's address and ZIP code		9	12a \$
b Employer identification number (EIN) 81-3489484	10 Dependent care benefits	12b \$	
7 Social security tips	11 Nonqualified plans	12c \$	
8 Allocated tips	14 Other	12d \$	
13 Statutory employee Retirement plan Third-party sick pay		12e \$	
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 2022 Department of the Treasury-Internal Revenue Service 584948342000538929

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8 Allocated tips	14 Other	12d \$	
13 Statutory employee Retirement plan Third-party sick pay		12e \$	
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

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COPY B - To Be Filed With Employee's FEDERAL Tax Return.

This information is being furnished to the Internal Revenue Service.

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3 Social security wages 24000.03		4 Social security tax withheld 1488.00	
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c Employer's name, address, and ZIP code DOM LAW, PA 1814 N 15TH ST TAMPA FL 33605			
e Employee's name DOMENICK G LAZZARA 5805 S. HUBERT AVE. TAMPA FL 33616			
f Employee's address and ZIP code		9	12a See instructions for box 12 \$
b Employer identification number (EIN) 81-3489484	10 Dependent care benefits	12b \$	
7 Social security tips	11 Nonqualified plans	12c \$	
8 Allocated tips	14 Other	12d \$	
13 Statutory employee Retirement plan Third-party sick pay		12e \$	
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 2022 Department of the Treasury-Internal Revenue Service DOMENICK

OMB# 1545-0008

COPY C - For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.)

This information is being furnished to the Internal Revenue Service if you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if the income is taxable and you fail to report it.

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f Employee's address and ZIP code		9	12a See instructions for box 12 \$
b Employer identification number (EIN) 81-3489484	10 Dependent care benefits	12b \$	
7 Social security tips	11 Nonqualified plans	12c \$	
8 Allocated tips	14 Other	12d \$	
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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

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