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5 State Employer's state ID number 16 State wages, tips, etc. 17 State inco								19 Local income tax 20 Locality r				
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b Employer identi		oc tine of	thor compo	neation	0 5-11		41-11-1					
22222	Void   a	Employee's social security number 123-45-6789	For Official Use Only ► OMB No. 1545-0008									

Form W-2 Wage and Tax Statement Copy A For Social Security Administration - Send this entire

Copy A For Social Security Administration - Send this entire page with Form W-3 to the Social Security Administration; photocopies are not acceptable.

**2017** 0000/1107

Department of the Treasury - Internal Revenue Service

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22222	Void $\Box$		s social security number	For Official Use Only										
	· o.a	123	3-45-6789	OMB	No. 1545					_				
b Employer identification number						1 Wages, tips, other compensation				2 Federal income tax withheld				
12-3456789							99999999999.99				999999999999.99			
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
INTEGRATED DATA MANAGEMENT SYSTEMS, INC.							99999999999.99				999999999999.99			
DBA IDMS ACCOUNT ABILITY							5 Medicare wages and tips				6 Medicare tax withheld			
555 BROADHOLLOW ROAD							99999999999.99				99999999999.99			
SUITE 273							7 Social security tips				8 Allocated tips			
MELVILLE NY 11747-5001						99999999999.99				99999999999.99				
d Control number						9 Verification code				10 Dependent care benefits				
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