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Statement	nber nber	e Employee's name, address, and ZIP code FRANK RODRIGUEZREYES RR7 BOX 16666 TOA ALTA PR 00953-8124	Employer identification number d Conto 35-9990000 C Employer's name, address, and ZIP code DFAS ATTN:DFASIN/JAREA 8899 EAST 56TH STREET INDIANAPOLIS IN 46249-2410
Department of the Treasury - Internal Revenue Service Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return	16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name	7 Social security tips 9 Advance EIC payment 72 See instructions for box 12	OMB No. 1545-0008 11 V 3 S

15 = State of Residency



