

2015 W-2 WAGES PAID

Name _____

Address _____

Federal I.D. No. _____

State I.D. No. _____

Please contact our office if
commodity wages were issued

Payee Name & Address (State if dependent child & if 18 or over)	Payee Social Security Number	Gross Amount (Amount Paid Before Taxes)	Soc. Sec. Tax Withheld	Medicare Tax Withheld	Federal Tax Withheld	State Tax Withheld	Net Wages (Amount of Check)

If you made monthly payroll deposits for agricultural wages, please record those payments below:

Total state withholding paid per quarter on above wages:
 1st Qtr. _____
 2nd Qtr. _____
 3rd Qtr. _____
 4th Qtr. _____

	Gross Wage	Federal Pmts		Gross Wage	Federal Pmts
January -	_____	_____	July -	_____	_____
February -	_____	_____	August -	_____	_____
March -	_____	_____	September -	_____	_____
April -	_____	_____	October -	_____	_____
May -	_____	_____	November -	_____	_____
June -	_____	_____	December -	_____	_____