U.S. TREAS Form treas-irs-w-2as-1995

a Control number	22222	Void ☐	**For Office Use Only** ► OMB No. 1545-0008

b Employer's identification number	**1** Wages, tips, other compensation	**2** Samoa income tax withheld
c Employer's name, address, and ZIP code	**3** Social security wages	**4** Social security tax withheld
	5 Medicare wages and tips	**6** Medicare tax withheld
	7 Social security tips	**8** Benefits included in box 1
d Employee's social security number	**9**	**10**
e Employee's name (first, middle initial, last)	**11** Nonqualified plans	**12**
	13 See Form W-3SS instructions	**14** Other
f Employee's address and ZIP code	**15** Statutory employee ☐ Pension plan ☐	Hshld. emp. ☐ Subtotal ☐ Deferred compensation ☐

Cat. No. 10140H

Department of the Treasury—Internal Revenue Service

Form **W-2AS** **American Samoa Wage and Tax Statement** **1995**

Copy A—For Social Security Administration

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