

Social Security Administration Retirement, Survivors, and Disability Insurance Request for Employer Information

Social Security Administration
Wilkes-Barre Direct Operations Center
P.O. Box 80
Wilkes Barre, PA 18767-0080

Date: January 17, 2023

Sequence Number: 9 3010100237 3

Employer Number: 27-1864566



T1 P0 **SNGLP 155372-1-1-1 - 256 EER 0110



WINCHESTER JAC LLC
ANDREW T ERICKSON MBR
840 KELLUM RD
OUTLOOK WA 98938-9769

000256

We are writing to you about your Form W-2, Wage and Tax Statement, for the employee shown below. The amount you reported appears to be payments made after the employee stopped working for you and is not covered by Social Security.

Employee's Name: SERGIO SANDOVAL RIOS
Social Security Number: 578-48-3876
Reported Earnings: \$9328.07
Tax Year: 2022

Please fill in the information on the back of this form and mail it to us in the enclosed envelope. If possible, verify the number on the employee's Social Security card and check your records to give us the information requested.

If you have any questions about this letter, you may call us toll free at 1-800-772-6270 from 7:00 a.m. to 7:00 p.m., Eastern Time. If you are deaf or hard of hearing, you may call our TTY number, 1-800-325-0778.

Social Security Administration

Enclosure:
Envelope



010133CND0000186756 CAEP-X3 LEADER-WB2-R230110.PAM 100000000 00260106356829262521898938976940 Page 511

000256
1/1

Social Security Request for Employment Information

1. Does the employee still work for you? Yes No (Give Last Known Address)

2. Did employment end because the employee died? Yes No

If employment ended because the employee died, refund the employee's share of the Social Security taxes to the employee's estate or next of kin, and obtain a receipt. Then, ask for a refund of the employer and employee Social Security taxes from the Internal Revenue Service (IRS). For details about how to obtain a refund, contact the IRS (there are time limits for seeking a refund from the IRS).

3. If the earnings shown above are earnings covered by Social Security, print the name and number shown on the employee's Social Security card and the tax year of these earnings:

	FIRST	M. INITIAL	LAST
Name:	SERGIO		SANDOVAL RIOS
Social Security Number:	578	- 48 -	3876
Tax Year:	2022		

**Privacy Act Statement
Collection and Use of Personal Information**

Section 205(c), 209(a), and 232 of the Social Security Act, as amended, allows us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information could prevent us from giving the employee credit for the correct amount of wages.

We will use the information you provide to verify wage information previously received and properly credit the employee for the correct amount of wages earned. We may also share your information for the following purposes, called routine uses:

- To employers or former employers, including State Social Security administrators, for correcting and reconstructing State employee earnings records and for Social Security purposes; and
- To officers and employees of Federal, State or local agencies upon written request in accordance with the Internal Revenue Code (IRC) U.S.C. 6103(i)(7), tax return information (e.g., information with respect to net earnings from self-employment, wages, payments of retirement income which have been disclosed to the Social Security Administration, and business and employment addresses) for purposes of, and to the extent necessary in, determining an individual's eligibility for, or the correct amount of, benefits under certain programs listed in the IRC.

In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.

A list of additional routine uses is available in our Privacy Act System of Records Notice (SORN) 60-0059, entitled Earnings Records and Self-Employment Income System, as published in the Federal Register (FR) on January 11, 2006, at 71 FR 1819. Additional information, and a full listing of all of our SORNs, is available on our website at <https://www.ssa.gov/privacy>.

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 10 minutes to read the instructions, gather the facts, and answer the questions. **SEND OR BRING THE COMPLETED FORM TO YOUR LOCAL SOCIAL SECURITY OFFICE.** You can find your local Social Security office through SSA's website at www.socialsecurity.gov. Offices are also listed under U. S. Government agencies in your telephone directory or you may call Social Security at 1-800-772-1213 (TTY 1-800-325-0778). You may send comments on our time estimate above to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401. **Send only comments relating to our time estimate to this address, not the completed form.**



FROM

NAME

ADDRESS

CITY

STATE

ZIP CODE

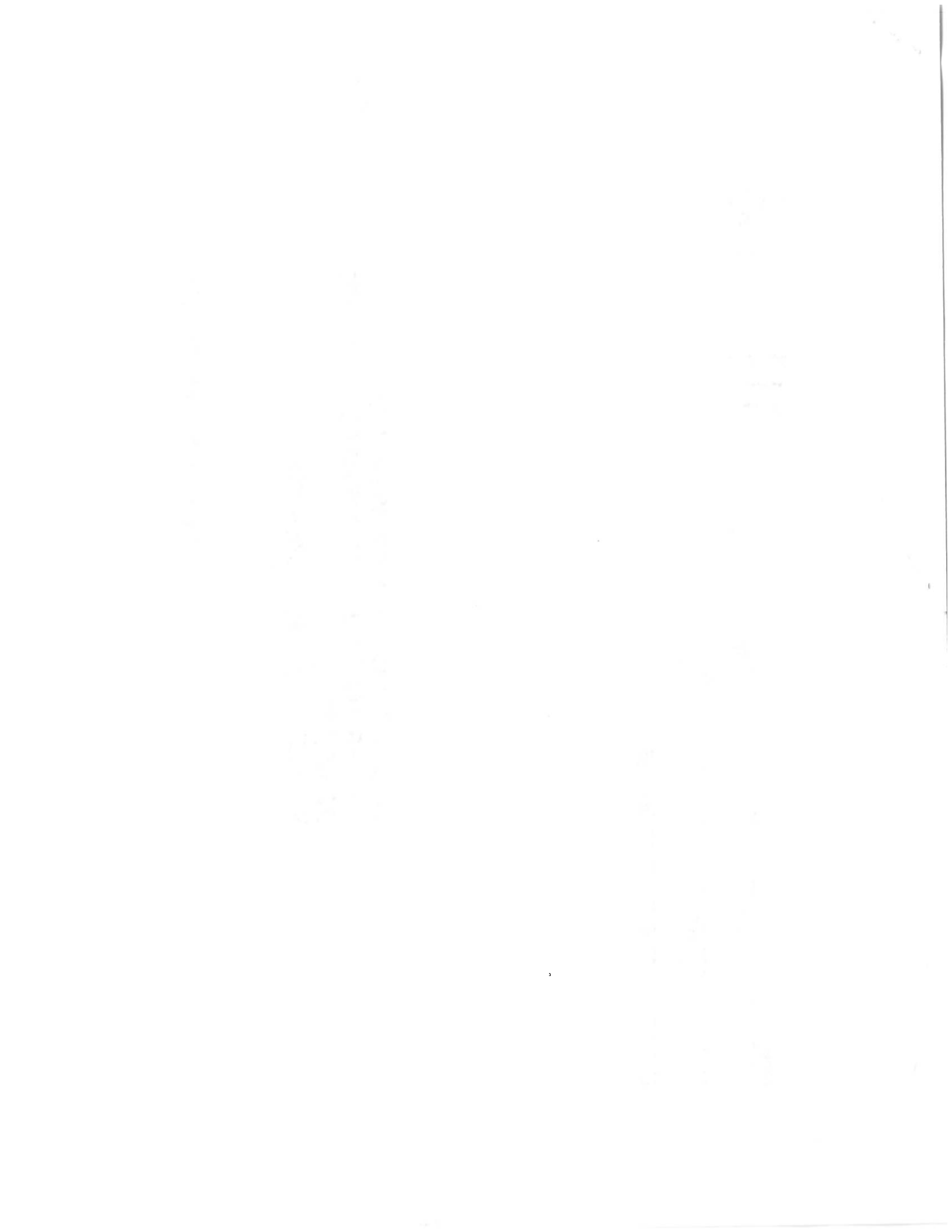
PLACE
POSTAGE
STAMP
HERE



D

SOCIAL SECURITY ADMINISTRATION
WILKES BARRE DIRECT OPERATIONS CENTER
PO BOX 80
WILKES BARRE PA 18767-0080





FROM

NAME

ADDRESS

CITY

STATE

ZIP CODE

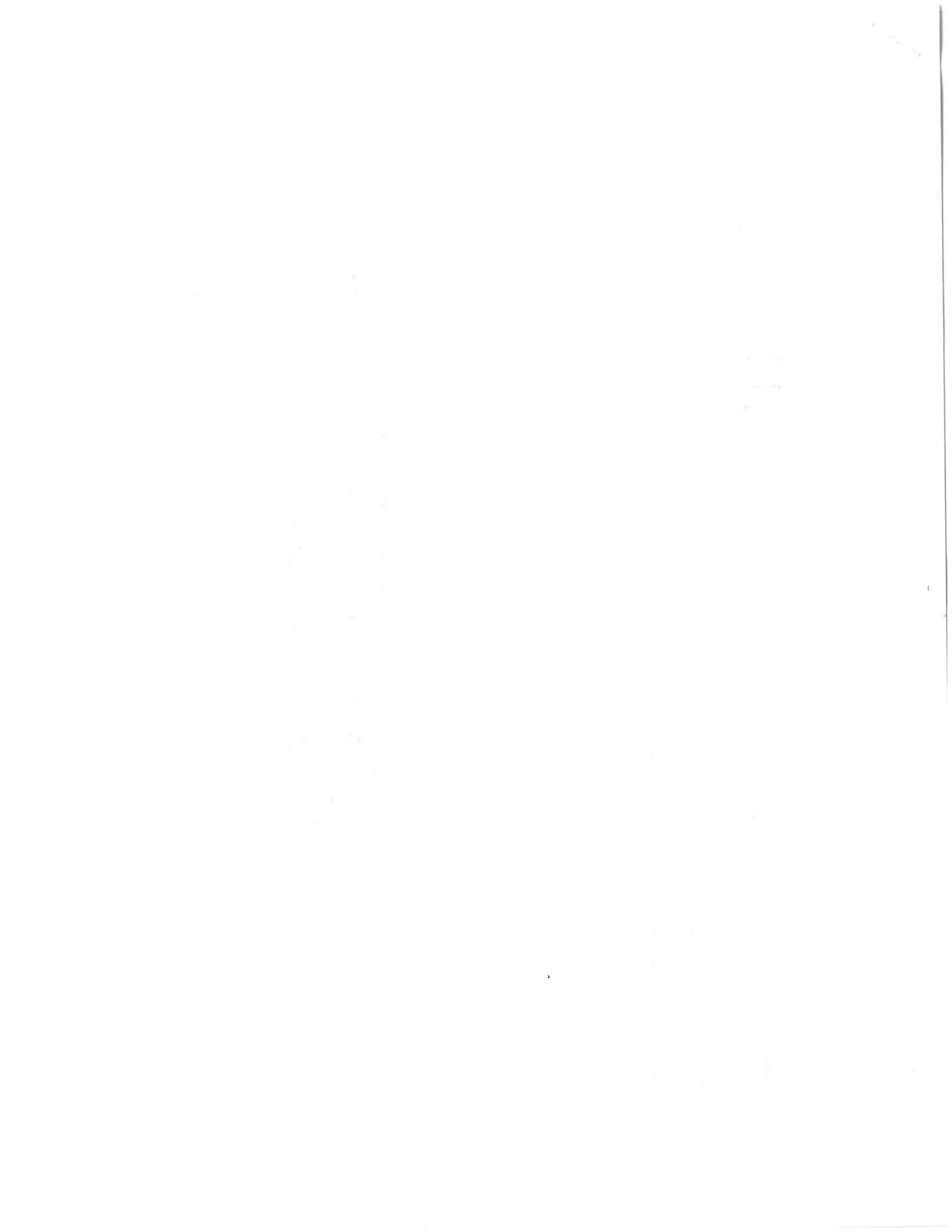
PLACE
POSTAGE
STAMP
HERE



D

SOCIAL SECURITY ADMINISTRATION
WILKES BARRE DIRECT OPERATIONS CENTER
PO BOX 80
WILKES BARRE PA 18767-0080





Social Security Request for Employment Information

1. Does the employee still work for you? Yes No (Give Last Known Address)

Grid for address information with a hyphen separator.

2. Did employment end because the employee died? Yes No

If employment ended because the employee died, refund the employee's share of the Social Security taxes to the employee's estate or next of kin, and obtain a receipt. Then, ask for a refund of the employer and employee Social Security taxes from the Internal Revenue Service (IRS). For details about how to obtain a refund, contact the IRS (there are time limits for seeking a refund from the IRS).

3. If the earnings shown above are earnings covered by Social Security, print the name and number shown on the employee's Social Security card and the tax year of these earnings:

Name: FIRST M. INITIAL LAST
SERGIO SANDOVAL RIOS
Social Security Number: 578 - 48 - 3876 Tax Year: 2022

**Privacy Act Statement
Collection and Use of Personal Information**

Section 205(c), 209(a), and 232 of the Social Security Act, as amended, allows us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information could prevent us from giving the employee credit for the correct amount of wages.

We will use the information you provide to verify wage information previously received and properly credit the employee for the correct amount of wages earned. We may also share your information for the following purposes, called routine uses:

- To employers or former employers, including State Social Security administrators, for correcting and reconstructing State employee earnings records and for Social Security purposes; and
- To officers and employees of Federal, State or local agencies upon written request in accordance with the Internal Revenue Code (IRC) U.S.C. 6103(1)(7), tax return information (e.g., information with respect to net earnings from self-employment, wages, payments of retirement income which have been disclosed to the Social Security Administration, and business and employment addresses) for purposes of, and to the extent necessary in, determining an individual's eligibility for, or the correct amount of, benefits under certain programs listed in the IRC.

In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.

A list of additional routine uses is available in our Privacy Act System of Records Notice (SORN) 60-0059, entitled Earnings Records and Self-Employment Income System, as published in the Federal Register (FR) on January 11, 2006, at 71 FR 1819. Additional information, and a full listing of all of our SORNs, is available on our website at <https://www.ssa.gov/privacy>.

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 10 minutes to read the instructions, gather the facts, and answer the questions. **SEND OR BRING THE COMPLETED FORM TO YOUR LOCAL SOCIAL SECURITY OFFICE. You can find your local Social Security office through SSA's website at www.socialsecurity.gov. Offices are also listed under U. S. Government agencies in your telephone directory or you may call Social Security at 1-800-772-1213 (TTY 1-800-325-0778). You may send comments on our time estimate above to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address, not the completed form.**



Social Security Administration Retirement, Survivors, and Disability Insurance Request for Employer Information



000256
1/1



T1 P0 **SNGLP 155372-1-1-1 - 256 EER 0110



000256

WINCHESTER JAC LLC
ANDREW T ERICKSON MBR
840 KELLUM RD
OUTLOOK WA 98938-9769

Social Security Administration
Wilkes-Barre Direct Operations Center
P.O. Box 80
Wilkes Barre, PA 18767-0080

Date: January 17, 2023

Sequence Number: 9 3010100237 3

Employer Number: 27-1864566

We are writing to you about your Form W-2, Wage and Tax Statement, for the employee shown below. The amount you reported appears to be payments made after the employee stopped working for you and is not covered by Social Security.

Employee's Name: SERGIO SANDOVAL RIOS
Social Security Number: 578-48-3876
Reported Earnings: \$9328.07
Tax Year: 2022

Please fill in the information on the back of this form and mail it to us in the enclosed envelope. If possible, verify the number on the employee's Social Security card and check your records to give us the information requested.

If you have any questions about this letter, you may call us toll free at 1-800-772-6270 from 7:00 a.m. to 7:00 p.m., Eastern Time. If you are deaf or hard of hearing, you may call our TTY number, 1-800-325-0778.

Social Security Administration

Enclosure:
Envelope



01013CMD000019627TAFXP3LEADER.WB2.R230110.PAM 100000000 0026010635682926521898938978940 Page 511