

a Control No.		b Employer identification number (EIN) 87-0625175			OMB No. 1545-0008		
c Employer's name, address, and ZIP code MOTOSAT 1955 S MILESTONE DR. SALT LAKE CITY, UT 84104		This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.					
		1 Wgs, tips, other compn 5572.26	2 Fed inc tax withheld	3 Social security wages 5572.26		Form W-2 Wage and Tax Statement 2006 Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee.)	
4 SS tax withheld 345.48	5 Medicare wages & tips 5572.26	6 Medicare tax withheld 80.80					
7 Social security tips	8 Allocated tips	9 Advance EIC payment					
10 Depndt care benefits	11 Nonqualified plans	12a					
d Employee's SSN Applied for		e Employee's name, address, and ZIP code ROBERT V CRIFASI C/O 5945 LILLYVALE PLACE WEST JORDAN, UT 84084		Suff.		12b	
				13 Statutory employee <input type="checkbox"/>		14 Other	
				Retirement plan . . . <input type="checkbox"/>		12c	
				Third-party sick pay <input type="checkbox"/>		12d	
15 State	Employer's state ID No.	16 State wages, tips, etc	17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name	

FRAUD