

**EMPLOYMENT CONTRACT FOR ROGER L. EDDY**

WHEREAS, the Board of Education of Hutsonville Community Unit School District No. 1, Clark and Crawford Counties, Illinois, hereinafter Board, and Roger L. Eddy, hereinafter Superintendent, entered into an employment contract on December 15, 1997 whereby the Board employed the Superintendent for the period of July 1, 1998 to June 30, 2001, and that employment contract was extended by the contract's terms and by operation of law to June 30, 2006; and

WHEREAS, the existing contract between the parties established certain other employment conditions; and

WHEREAS, the Board and Superintendent are desirous of making certain changes to that Superintendent's Contract as established at the meeting of the Board on June 19, 2006; and

Now therefore, in consideration of the promises, and for other good and valuable consideration, the receipt whereof is hereby acknowledged, it is agreed by and between the parties as follows:

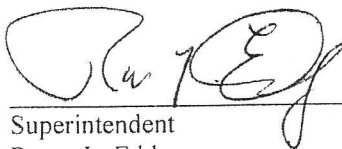
1. The parties reaffirm their employment relationship and agree that the Superintendent's employment contract shall be for not less than 171 days during the 2006-07 school year and not less than 171 days during the 2007-08, 2008-09, 2009-10 and 2010-11 school years; and
2. That the Superintendent shall hereby accept the sum of not less than \$400.00 (Four Hundred and No/100 dollars) per day for each of the 171 days during the 2006-07 school year with per day salary to be established on an annual basis for each subsequent year after the 2006-07 school year ; and
3. That in addition to the per diem salary, the Board agrees to pay the Superintendent's entire required contribution to the Downstate Illinois Teachers' Retirement System, including the Superintendent's required contribution to the THIS Fund; and
4. That in addition to the per diem salary, the Board agrees to pay the Superintendent's required Medicaid contribution; and
5. The parties agree this multiple year employment is performance-based linked to student performance and academic improvement of schools within the District. The Superintendent shall strive to meet the goals during the term of this Contract. The parties agree the goals and indicators are linked to student performance and academic improvement of the District.

Annually the Superintendent, with the assistance of his administrative team, shall

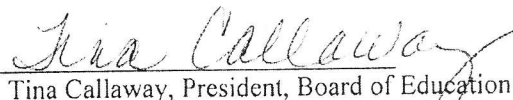
- (a) evaluate student performance, which shall include but not be limited to student performance on standardized tests such as performance on the Prairie State Achievement Exam, completion of the curriculum, attendance and dropout rates;
- (b) review the curriculum and instructional services of the District; and report to the Board on his findings as to (i) student performance and (ii) recommendations, if any, for curriculum or instructional changes as a result of his evaluation of student performance; and

6. Whereas the parties reaffirm all other provisions of the Superintendent's Contract.

In witness thereof, the parties have hereunto set their hands and seals this 20th day of June, 2006.




\_\_\_\_\_  
 Superintendent  
 Roger L. Eddy



\_\_\_\_\_  
 Tina Callaway, President, Board of Education  
 Hutsonville CUSD No. 1  
 Clark and Crawford Counties, Illinois

ATTEST:



\_\_\_\_\_  
 Secretary, Board of Education

b Employer identification number		1 Wages, tips, other compensation 62790.39		2 Federal income tax withheld 5550.72	
c Employer's name, address, and ZIP code HUTSONVILLE C.U.S.D. NO. 1 P.O. BOX 218 W. CLOVER STREET HUTSONVILLE, IL 62433		3 Social security wages		4 Social security tax withheld	
		5 Medicare wages and tips 62790.39		6 Medicare tax withheld 910.46	
		7 Social security tips		8 Allocated tips	
d Employee's social security number		9 Advance EIC payment		10 Dependent care benefits	
e Employee's name, address, and ZIP code ROGER L. EDDY 13998 E. 1900TH AVE. HUTSONVILLE, IL 62433-00		11 Nonqualified plans		12a See instructions for box 12	
		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		12b	
		14 Other		12c	
				12d	
15 State Employer's state ID number IL	16 State wages, tips, etc. 62790.39	17 State income tax 1636.16	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form **W-2** Wage and Tax Statement

**2003**

39-1908647 Department of the Treasury—Internal Revenue Service  
For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.  
BW2ERD NTF 2559397

a Control number 00043		1 Wages, tips, other compensation 60258.16		2 Federal income tax withheld 4798.73	
b Employer ID number		3 Social security wages .00		4 Social security tax withheld .00	
		5 Medicare wages and tips 62228.08		6 Medicare tax withheld 902.28	
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433					
d Identifier number					
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433					
7 Social security tips .00		8 Allocated tips .00		9 Advance EIC payment .00	
10 Dependent care benefits .00		11 Nonqualified plans .00		12a Code See instructions for box 12 E 1200.00	
13 Statutory employee		14 Other		12b Code	
Retirement plan				12c Code	
Third-party sick pay				12d Code	
IL		60258.16		1512.12	
15 State Employer's state I.D.#		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc. .00		19 Local income tax .00		20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

a Control number 00043		1 Wages, tips, other compensation 60258.16		2 Federal income tax withheld 4798.73	
b Employer ID number		3 Social security wages .00		4 Social security tax withheld .00	
		5 Medicare wages and tips 62228.08		6 Medicare tax withheld 902.28	
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433					
d Identifier number					
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433					
7 Social security tips .00		8 Allocated tips .00		9 Advance EIC payment .00	
10 Dependent care benefits .00		11 Nonqualified plans .00		12a Code See instructions for box 12 E 1200.00	
13 Statutory employee		14 Other		12b Code	
Retirement plan				12c Code	
Third-party sick pay				12d Code	
IL		60258.16		1512.12	
15 State Employer's state I.D.#		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc. .00		19 Local income tax .00		20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

22222		Employer's - State, Local, or File Copy		2004		OMB No. 1545-0008	
a Control number 00043		1 Wages, tips, other compensation 60258.16		2 Federal income tax withheld 4798.73			
b Employer ID number		3 Social security wages .00		4 Social security tax withheld .00			
		5 Medicare wages and tips 62228.08		6 Medicare tax withheld 902.28			
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433							
d Identifier number							
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433							
7 Social security tips .00		8 Allocated tips .00		9 Advance EIC payment .00			
10 Dependent care benefits .00		11 Nonqualified plans .00		12a Code See instructions for box 12 E 1200.00			
13 Statutory employee		14 Other		12b Code			
Retirement plan				12c Code			
Third-party sick pay				12d Code			
IL		60258.16		1512.12			
15 State Employer's state I.D.#		16 State wages, tips, etc.		17 State income tax			
18 Local wages, tips, etc. .00		19 Local income tax .00		20 Locality name			

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
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22222		Employer's - State, Local, or File Copy		2004		OMB No. 1545-0008	
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b Employer ID number		3 Social security wages .00		4 Social security tax withheld .00			
		5 Medicare wages and tips 62228.08		6 Medicare tax withheld 902.28			
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433							
d Identifier number							
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433							
7 Social security tips .00		8 Allocated tips .00		9 Advance EIC payment .00			
10 Dependent care benefits .00		11 Nonqualified plans .00		12a Code See instructions for box 12 E 1200.00			
13 Statutory employee		14 Other		12b Code			
Retirement plan				12c Code			
Third-party sick pay				12d Code			
IL		60258.16		1512.12			
15 State Employer's state I.D.#		16 State wages, tips, etc.		17 State income tax			
18 Local wages, tips, etc. .00		19 Local income tax .00		20 Locality name			

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

FORM L4UPR

a Control number 00043		1 Wages, tips, other comp. 60380.70		2 Federal income tax withheld 4727.10	
b Employer ID number (EIN)		3 Social security wages .00		4 Social security tax withheld .00	
		5 Medicare wages and tips 63736.74		6 Medicare tax withheld 924.18	
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433					
d Employer's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1 HUTSONVILLE, IL. 62433					
7 Social security tips .00		8 Allocated tips .00		9 Advance EIC payment .00	
10 Dependent care benefits .00		11 Nonqualified plans .00		12a Code See inst. for box 12 E 2400.00	
13 Statutory employee		14 Other		12b Code	
Retirement plan X				12c Code	
Third-party sick pay				12d Code	
IL		60380.70		1511.40	
5 State Employer's state I.D. #		16 State wages, tips, etc.		17 State income tax	
8 Local wages, tips, etc. .00		19 Local income tax .00		20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

a Control number 00043		1 Wages, tips, other comp. 60380.70		2 Federal income tax withheld 4727.10	
b Employer ID number (EIN)		3 Social security wages .00		4 Social security tax withheld .00	
		5 Medicare wages and tips 63736.74		6 Medicare tax withheld 924.18	
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433					
d Employer's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1 HUTSONVILLE, IL. 62433					
7 Social security tips .00		8 Allocated tips .00		9 Advance EIC payment .00	
10 Dependent care benefits .00		11 Nonqualified plans .00		12a Code See inst. for box 12 E 2400.00	
13 Statutory employee		14 Other		12b Code	
Retirement plan X				12c Code	
Third-party sick pay				12d Code	
IL		60380.70		1511.40	
15 State Employer's state I.D. #		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc. .00		19 Local income tax .00		20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

22222 Employer's - State, Local, or File Copy		2005		OMB No. 1545-0008	
a Control number 00043		1 Wages, tips, other comp. 60380.70		2 Federal income tax withheld 4727.10	
b Employer ID number (EIN)		3 Social security wages .00		4 Social security tax withheld .00	
		5 Medicare wages and tips 63736.74		6 Medicare tax withheld 924.18	
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433					
d Employer's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1 HUTSONVILLE, IL. 62433					
7 Social security tips .00		8 Allocated tips .00		9 Advance EIC payment .00	
10 Dependent care benefits .00		11 Nonqualified plans .00		12a Code See inst. for box 12 E 2400.00	
13 Statutory employee		14 Other		12b Code	
Retirement plan X				12c Code	
Third-party sick pay				12d Code	
IL		60380.70		1511.40	
5 State Employer's state I.D. #		16 State wages, tips, etc.		17 State income tax	
8 Local wages, tips, etc. .00		19 Local income tax .00		20 Locality name	

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22222 Employer's - State, Local, or File Copy		2005		OMB No. 1545-0008	
a Control number 00043		1 Wages, tips, other comp. 60380.70		2 Federal income tax withheld 4727.10	
b Employer ID number (EIN)		3 Social security wages .00		4 Social security tax withheld .00	
		5 Medicare wages and tips 63736.74		6 Medicare tax withheld 924.18	
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433					
d Employer's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1 HUTSONVILLE, IL. 62433					
7 Social security tips .00		8 Allocated tips .00		9 Advance EIC payment .00	
10 Dependent care benefits .00		11 Nonqualified plans .00		12a Code See inst. for box 12 E 2400.00	
13 Statutory employee		14 Other		12b Code	
Retirement plan X				12c Code	
Third-party sick pay				12d Code	
IL		60380.70		1511.40	
15 State Employer's state I.D. #		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc. .00		19 Local income tax .00		20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
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Control number 00043		1 Wages, tips, other comp. 61216.32	2 Federal income tax withheld 5437.44
3 Social security wages .00		4 Social security tax withheld .00	
Employer ID number (EIN)		5 Medicare wages and tips 68239.92	6 Medicare tax withheld 989.52
Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
Employer's telephone number			
Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1 HUTSONVILLE, IL. 62433			
Social security tips .00		8 Allocated tips .00	9 Advance EIC payment .00
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instr. E 6000.00	
3 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	61216.32	1536.48	
5 State Employer's state I.D. #		16 State wages, tips, etc.	17 State income tax
3 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

Control number 00043		1 Wages, tips, other comp. 61216.32	2 Federal income tax withheld 5437.44
3 Social security wages .00		4 Social security tax withheld .00	
Employer ID number (EIN)		5 Medicare wages and tips 68239.92	6 Medicare tax withheld 989.52
Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
Employer's telephone number			
Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1 HUTSONVILLE, IL. 62433			
7 Social security tips .00		8 Allocated tips .00	9 Advance EIC payment .00
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instr. E 6000.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	61216.32	1536.48	
15 State Employer's state I.D. #		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

22222 Employer's - State, Local, or File Copy		2006 OMB No. 1545-0008	
Control number 00043		1 Wages, tips, other comp. 61216.32	2 Federal income tax withheld 5437.44
3 Social security wages .00		4 Social security tax withheld .00	
Employer ID number (EIN)		5 Medicare wages and tips 68239.92	6 Medicare tax withheld 989.52
Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
Employer's telephone number			
Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1 HUTSONVILLE, IL. 62433			
7 Social security tips .00		8 Allocated tips .00	9 Advance EIC payment .00
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instr. for box 12 E 6000.00	
3 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	61216.32	1536.48	
5 State Employer's state I.D. #		16 State wages, tips, etc.	17 State income tax
8 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

22222 Employer's - State, Local, or File Copy		2006 OMB No. 1545-0008	
Control number 00043		1 Wages, tips, other comp. 61216.32	2 Federal income tax withheld 5437.44
3 Social security wages .00		4 Social security tax withheld .00	
Employer ID number (EIN)		5 Medicare wages and tips 68239.92	6 Medicare tax withheld 989.52
Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
Employee's social security number			
Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1 HUTSONVILLE, IL. 62433			
7 Social security tips .00		8 Allocated tips .00	9 Advance EIC payment .00
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instr. for box 12 E 6000.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	61216.32	1536.48	
15 State Employer's state I.D. #		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D. FORM L4UPP

a Employee's soc. sec. no.	1 Wages, tips, other comp. 62691.58	2 Federal income tax withheld 6936.28
b Employer ID number (EIN)	3 Social security wages .00	4 Social security tax withheld .00
	5 Medicare wages and tips 76742.74	6 Medicare tax withheld 1112.80
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433		
d Control number 00043		
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433		
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions for box 12 E 12900.00
13 Statutory employee	14 Other	12b Code
Retirement plan X		12c Code
Third-party sick pay		12d Code
IL	62691.58	1580.76
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

a Employee's soc. sec. no.	1 Wages, tips, other comp. 62691.58	2 Federal income tax withheld 6936.28
b Employer ID number (EIN)	3 Social security wages .00	4 Social security tax withheld .00
	5 Medicare wages and tips 76742.74	6 Medicare tax withheld 1112.80
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433		
d Control number 00043		
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433		
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions for box 12 E 12900.00
13 Statutory employee	14 Other	12b Code
Retirement plan X		12c Code
Third-party sick pay		12d Code
IL	62691.58	1580.76
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
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22222	Employer's - State, Local, or File Copy	2007	OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp. 62691.58	2 Federal income tax withheld 6936.28	
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	5 Medicare wages and tips 76742.74	6 Medicare tax withheld 1112.80	
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d Control number 00043			
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions for box 12 E 12900.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	62691.58	1580.76	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
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22222	Employer's - State, Local, or File Copy	2007	OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp. 62691.58	2 Federal income tax withheld 6936.28	
b Employer ID number (EIN)	3 Social security wages .00	4 Social security tax withheld .00	
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d Control number 00043			
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions for box 12 E 12900.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	62691.58	1580.76	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 41-1628061 Dept. of the Treasury - IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.



Employee's soc. sec. no.		1 Wages, tips, other comp.	2 Federal income tax withheld
		79165.98	17022.39
3 Social security wages		4 Social security tax withheld	
.00		.00	
b Employer ID number (EIN)		6 Medicare tax withheld	
		1183.08	
5 Medicare wages and tips		6 Medicare tax withheld	
81589.83		1183.08	
c Employer's name, address, and ZIP code			
Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number			
00043			
e Employee's name, address, and ZIP code <span style="float:right">Suff.</span>			
ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips	8 Allocated tips	9 Advance EIC payment	
.00	.00	.00	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
.00	.00	E 1200.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	79165.98	2074.98	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
	.00	.00	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
.00	.00		

Form W-2 Wage and Tax Statement **2008** Dept. of the Treasury -- IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

Employee's soc. sec. no.		1 Wages, tips, other comp.	2 Federal income tax withheld
		79165.98	17022.39
3 Social security wages		4 Social security tax withheld	
.00		.00	
b Employer ID number (EIN)		6 Medicare tax withheld	
		1183.08	
5 Medicare wages and tips		6 Medicare tax withheld	
81589.83		1183.08	
c Employer's name, address, and ZIP code			
Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number			
00043			
e Employee's name, address, and ZIP code <span style="float:right">Suff.</span>			
ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips	8 Allocated tips	9 Advance EIC payment	
.00	.00	.00	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
.00	.00	E 1200.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	79165.98	2074.98	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
	.00	.00	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
.00	.00		

Form W-2 Wage and Tax Statement **2008** Dept. of the Treasury -- IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

22222 Employer's - State, Local, or File Copy		41-1628061 OMB No. 1545-0008	
a Employee's soc. sec. no.		1 Wages, tips, other comp.	2 Federal income tax withheld
		79165.98	17022.39
3 Social security wages		4 Social security tax withheld	
.00		.00	
b Employer ID number (EIN)		6 Medicare tax withheld	
		1183.08	
5 Medicare wages and tips		6 Medicare tax withheld	
81589.83		1183.08	
c Employer's name, address, and ZIP code			
Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number			
00043			
e Employee's name, address, and ZIP code <span style="float:right">Suff.</span>			
ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips	8 Allocated tips	9 Advance EIC payment	
.00	.00	.00	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
.00	.00	E 1200.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	79165.98	2074.98	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
	.00	.00	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
.00	.00		

Form W-2 Wage and Tax Statement **2008** Dept. of the Treasury -- IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

22222 Employer's - State, Local, or File Copy		41-1628061 OMB No. 1545-0008	
a Employee's soc. sec. no.		1 Wages, tips, other comp.	2 Federal income tax withheld
		79165.98	17022.39
3 Social security wages		4 Social security tax withheld	
.00		.00	
b Employer ID number (EIN)		6 Medicare tax withheld	
		1183.08	
5 Medicare wages and tips		6 Medicare tax withheld	
81589.83		1183.08	
c Employer's name, address, and ZIP code			
Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number			
00043			
e Employee's name, address, and ZIP code <span style="float:right">Suff.</span>			
ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips	8 Allocated tips	9 Advance EIC payment	
.00	.00	.00	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	
.00	.00	E 1200.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL	79165.98	2074.98	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
	.00	.00	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
.00	.00		

Form W-2 Wage and Tax Statement **2008** Dept. of the Treasury -- IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

FORM L4UPP

a Employee's soc. sec. no.		1 Wages, tips, other comp. 82972.84	2 Federal income tax withheld 16794.30
b Employer ID number (EIN)		3 Social security wages .00	4 Social security tax withheld .00
		5 Medicare wages and tips 84172.84	6 Medicare tax withheld 1220.52
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number 00043			
e Employee's name, address, and ZIP code Suff. ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See inst. E 1200.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL		82972.84	2189.16
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 2009 Dept. of the Treasury -- IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

a Employee's soc. sec. no.		1 Wages, tips, other comp. 82972.84	2 Federal income tax withheld 16794.30
b Employer ID number (EIN)		3 Social security wages .00	4 Social security tax withheld .00
		5 Medicare wages and tips 84172.84	6 Medicare tax withheld 1220.52
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number 00043			
e Employee's name, address, and ZIP code Suff. ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See inst. E 1200.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL		82972.84	2189.16
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 2009 Dept. of the Treasury -- IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

22222 Employer's - State, Local, or File Copy		41-1628061 OMB No. 1545-0008	
a Employee's soc. sec. no.	1 Wages, tips, other comp. 82972.84	2 Federal income tax withheld 16794.30	
b Employer ID number (EIN)	3 Social security wages .00	4 Social security tax withheld .00	
	5 Medicare wages and tips 84172.84	6 Medicare tax withheld 1220.52	
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number 00043			
e Employee's name, address, and ZIP code Suff. ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See inst. for box 12 E 1200.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL		82972.84	2189.16
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 2009 Dept. of the Treasury -- IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.

22222 Employer's - State, Local, or File Copy		41-1628061 OMB No. 1545-0008	
a Employee's soc. sec. no.	1 Wages, tips, other comp. 82972.84	2 Federal income tax withheld 16794.30	
b Employer ID number (EIN)	3 Social security wages .00	4 Social security tax withheld .00	
	5 Medicare wages and tips 84172.84	6 Medicare tax withheld 1220.52	
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number 00043			
e Employee's name, address, and ZIP code Suff. ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See inst. for box 12 E 1200.00	
13 Statutory employee	14 Other	12b Code	
Retirement plan X		12c Code	
Third-party sick pay		12d Code	
IL		82972.84	2189.16
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement 2009 Dept. of the Treasury -- IRS  
For Privacy Act and Paperwork Reduction Act Notice, see back of Copy D.



a Employee's soc. sec. no.	1 Wages, tips, other comp. 88021.53	2 Federal income tax withheld 19113.06
b Employer ID number (EIN)	3 Social security wages .00	4 Social security tax withheld .00
	5 Medicare wages and tips 89221.53	6 Medicare tax withheld 1293.72
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433		
d Control number 00043		
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433		
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions E 1200.00
13 Statutory employee	14 Other	12b Code
Retirement plan X		12c Code
Third-party sick pay		12d Code
IL	88021.53	2340.66
5 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax
8 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name

Form W-2 Wage and Tax Statement  
For Privacy Act and Paperwork Reduction Act  
Notice, see back of Copy D.

Dept. of the Treasury -- IRS

a Employee's soc. sec. no.	1 Wages, tips, other comp. 88021.53	2 Federal income tax withheld 19113.06
b Employer ID number (EIN)	3 Social security wages .00	4 Social security tax withheld .00
	5 Medicare wages and tips 89221.53	6 Medicare tax withheld 1293.72
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433		
d Control number 00043		
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433		
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions E 1200.00
13 Statutory employee	14 Other	12b Code
Retirement plan X		12c Code
Third-party sick pay		12d Code
IL	88021.53	2340.66
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name

Form W-2 Wage and Tax Statement  
For Privacy Act and Paperwork Reduction Act  
Notice, see back of Copy D.

Dept. of the Treasury -- IRS

<b>Employers State, Local, or File Copy</b>		22222	<b>2010</b>	OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp. 88021.53	2 Federal income tax withheld 19113.06		
b Employer ID number (EIN)	3 Social security wages .00	4 Social security tax withheld .00		
	5 Medicare wages and tips 89221.53	6 Medicare tax withheld 1293.72		
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433				
d Control number 00043				
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433				
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00		
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions E 1200.00		
13 Statutory employee	14 Other	12b Code		
Retirement plan X		12c Code		
Third-party sick pay		12d Code		
IL	88021.53	2340.66		
5 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		
8 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name		

Form W-2 Wage and Tax Statement  
For Privacy Act and Paperwork Reduction Act  
Notice, see back of Copy D.

Dept. of the Treasury -- IRS

<b>Employers State, Local, or File Copy</b>		22222	<b>2010</b>	OMB No. 1545-0008
a Employee's soc. sec. no.	1 Wages, tips, other comp. 88021.53	2 Federal income tax withheld 19113.06		
b Employer ID number (EIN)	3 Social security wages .00	4 Social security tax withheld .00		
	5 Medicare wages and tips 89221.53	6 Medicare tax withheld 1293.72		
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433				
d Control number 00043				
e Employee's name, address, and ZIP code ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433				
7 Social security tips .00	8 Allocated tips .00	9 Advance EIC payment .00		
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions E 1200.00		
13 Statutory employee	14 Other	12b Code		
Retirement plan X		12c Code		
Third-party sick pay		12d Code		
IL	88021.53	2340.66		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name		

Form W-2 Wage and Tax Statement  
For Privacy Act and Paperwork Reduction Act  
Notice, see back of Copy D.

Dept. of the Treasury -- IRS

L4UPR

5405

a Employee's soc. sec. no.		1 Wages, tips, other comp. 93361.47	2 Federal income tax withheld 23400.00
b Employer ID number (EIN)		3 Social security wages .00	4 Social security tax withheld .00
		5 Medicare wages and tips 94561.47	6 Medicare tax withheld 1371.18
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number 00043			
e Employee's name, address, and ZIP code Suff. ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions E 1200:00	
13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	
Third-party sick pay		12d Code	
IL	93361.47	4133.74	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement  
For Privacy Act and Paperwork Reduction Act  
Notice, see back of Copy D. Dept. of the Treasury -- IRS

a Employee's soc. sec. no.		1 Wages, tips, other comp. 93361.47	2 Federal income tax withheld 23400.00
b Employer ID number (EIN)		3 Social security wages .00	4 Social security tax withheld .00
		5 Medicare wages and tips 94561.47	6 Medicare tax withheld 1371.18
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number 00043			
e Employee's name, address, and ZIP code Suff. ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions E 1200:00	
13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	
Third-party sick pay		12d Code	
IL	93361.47	4133.74	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement  
For Privacy Act and Paperwork Reduction Act  
Notice, see back of Copy D. Dept. of the Treasury -- IRS

Employers State, Local, or File Copy 22222		2011 OMB No. 1545-0008	
a Employee's soc. sec. no.		1 Wages, tips, other comp. 93361.47	2 Federal income tax withheld 23400.00
b Employer ID number (EIN)		3 Social security wages .00	4 Social security tax withheld .00
		5 Medicare wages and tips 94561.47	6 Medicare tax withheld 1371.18
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number 00043			
e Employee's name, address, and ZIP code Suff. ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions E 1200:00	
13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	
Third-party sick pay		12d Code	
IL	93361.47	4133.74	
5 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
8 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement  
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Employers State, Local, or File Copy 22222		2011 OMB No. 1545-0008	
a Employee's soc. sec. no.		1 Wages, tips, other comp. 93361.47	2 Federal income tax withheld 23400.00
b Employer ID number (EIN)		3 Social security wages .00	4 Social security tax withheld .00
		5 Medicare wages and tips 94561.47	6 Medicare tax withheld 1371.18
c Employer's name, address, and ZIP code Hutsonville CUSD #1 P.O. Box 218 500 W. Clover Street Hutsonville, IL. 62433			
d Control number 00043			
e Employee's name, address, and ZIP code Suff. ROGER L. EDDY 16313 N. ST. HWY. 1  HUTSONVILLE, IL. 62433			
7 Social security tips .00	8 Allocated tips .00	9 .00	
10 Dependent care benefits .00	11 Nonqualified plans .00	12a Code See instructions E 1200:00	
13 Statutory employee	14 Other	12b Code	
Retirement plan		12c Code	
Third-party sick pay		12d Code	
IL	93361.47	4133.74	
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. .00	19 Local income tax .00	20 Locality name	

Form W-2 Wage and Tax Statement  
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