State of Connecticut Department of Revenue Services PO Box 5081 Hartford CT 06102-5081

Form CT- 4802 Transmittal of Informational Returns **Reported Magnetically (Continuation)**

Form CT-4802 is a continuation of Form CT-4804 and should be used only if you are reporting for more than four payers. See instructions on Form CT-4804.

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of	

(Rev. 09/00)

Calendar year for which media are submitted				Transmitter's Connecticut Tax Registration Number				
Name and address of transmitter (include street, PO box, city, state, and ZIP Code)				Transmitter's Federal Employer Identification Number				
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10. Payer Summary of Magnetic Media Wage Informational Return				10. Payer Summary of Magnetic Media Wage Informational Return				
Name of Payer				Name of Payer				
Street Address				Street Address				
City State Zip				City State Zip				
Connecticut Tax Registration Number				Connecticut Tax Registration Number				
Federal Employer ID Number				Federal Employer ID Number				
Type of Return				Type of Return				
Number of 1098s, 1099s, or W-2Gs Submitted			Number of 1098s, 1099s, or W-2Gs Submitted					
Total Nonpayroll Amounts Reported				al Nonpayroll Amounts Reported		_		
Connecticut Tax Withheld			Con	necticut Tax Withheld	<u> </u>			
10. Payer Summary of Magnetic Me	dia Wage Informational R	eturn	10.	Payer Summary of Magnetic Me	edia Wage Informational F	Return		
Name of Payer				Name of Payer				
Street Address				Street Address				
City State	Zip		City	State	Zip			
Connecticut Tax Registration Number			Connecticut Tax Registration Number					
Federal Employer ID Number				Federal Employer ID Number				
Type of Return			Type of Return					
Number of 1098s, 1099s, or W-2Gs Submitted				Number of 1098s, 1099s, or W-2Gs Submitted				
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Street Address				Street Address				
City State Zip			City State Zip					
Connecticut Tax Registration Number				Connecticut Tax Registration Number				
Federal Employer ID Number				Federal Employer ID Number				
Type of Return				Type of Return				
Number of 1098s, 1099s, or W-2Gs Submitted			Number of 1098s, 1099s, or W-2Gs Submitted					
Total Nonpayroll Amounts Reported			Tota	al Nonpayroll Amounts Reported				
Connecticut Tax Withheld			Con	necticut Tax Withheld				
10. Payer Summary of Magnetic Med	dia Wage Informational R	eturn		Payer Summary of Magnetic Me	idia Wage Informational F	Return		
Name of Payer				ne of Payer				
Street Address				et Address				
City State Zip			City State Zip					
Connecticut Tax Registration Number				Connecticut Tax Registration Number				
Federal Employer ID Number				eral Employer ID Number				
Type of Return			Type of Return					
Number of 1098s, 1099s, or W-2Gs Submitted				nber of 1098s, 1099s, or W-2Gs S	Submitted	1		
Total Nonpayroll Amounts Reported				al Nonpayroll Amounts Reported		+		
Connecticut Tax Withheld			Con	necticut Tax Withheld	<u> </u>			