



Request for W-2

Name: _____

I, _____, request a copy of my W-2 for
20_____.

My social security number is _____.

My phone number is _____.

My address is _____

City _____ State _____ Zip _____.

Please mail the W-2 to me at the above address.

Thank you,

Print Name: _____

Signature: _____

HD Branch: _____