

MAIL TO: **Meredith College**
Human Resources
3800 Hillsborough Street
Raleigh, NC 27607

Date of Request

REQUEST FOR DUPLICATE FORM W-2

PLEASE PRINT

Please reissue a WAGE AND TAX STATEMENT (Form W-2) for the following employee for the tax year ending _____. **There is a \$5.00 charge for each W-2 requested. This fee must be paid at the time of the request.**

EMPLOYEE NAME: _____

SOCIAL SECURITY NO.: _____

PHONE NUMBER: __ (____) _____
Area Code Number

EMPLOYEE CURRENT MAILING ADDRESS:

Street Address

City

State

Zip Code

The FORM W-2 is requested for the following reason:

_____ Never received Pick Up _____

_____ Misplaced or Destroyed Mail _____

_____ Social Security Number or Name Incorrect

_____ Other (Explain)

Signature of Employee

=====

FOR DEPARTMENT USE ONLY:

Reissued on: _____

Mailed on: _____

Processed by: _____