Checkmate
WORKFORCE MANAGEMENT SOLUTIONS

REQUEST FOR IRS FORM W-2
PLEASE PRINT

Please reissue a **WAGE AND TAX STATEMENT (Form W-2)** for the following employee, for the tax year ending _____.

EMPLOYER NAME: _____

EMPLOYEE NAME: _____

SOCIAL SECURITY NO: _____

EMPLOYEE CURRENT MAILING ADDRESS:

Address_____

City_____ State_____ Zip Code_____

The FORM W-2 is requested for the reason:

_____ Never Received
_____ Misplaced or Destroyed
_____ Social Security Number or Name Incorrect
_____ Other (Explain) _____

_____   _____
          DATE   **EMPLOYER SIGNATURE**

_____

FOR CHECKMATE USE ONLY:

Date request rec'd: _____   Original W-2 re-mailed: _____

    Processed by: _____   Duplicate W-2 re-issued:_____