

**Riverview Gardens School District  
Duplicate W-2 Request Form**

Note: Requests for Duplicate W-2's will be completed within TWO WEEKS of the receipt of this form. This form will be date stamped upon receipt by the Payroll Office.

**There is a \$2.00 fee per copy. IE: If you request copies of 2007 & 2008 W-2's the fee will be \$4.00**

**Please Print Clearly**

**Tax Year(s) Requesting:** \_\_\_\_\_

**Reason:** \_\_\_\_\_

**Name on W-2: Last Name:** \_\_\_\_\_

**First Name:** \_\_\_\_\_

**Employee Number or Last Four Digits of Social Security Number:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Delivery Options (Select One):**

**Mail the copy to my home:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Inner Office Mail to my School/Building:** \_\_\_\_\_

**Call me when available for Pick Up at the Front Desk: (\_\_\_\_\_) \_\_\_\_\_**

**For Office Use Only**

**Date Received:** \_\_\_\_\_

**Date Completed:** \_\_\_\_\_