

Pay slip and W2 Reprint Request Form

Employee: _____ Employee ID : _____

Employee ID: _____

Address: _____

City: _____ State: _____ Zip: _____

Email (Required): _____ Phone Number: _____

Request for: W2 ☐ Pay slip ☐ Year: _____ Month(s): _____

Method of Delivery: ☐ Mail ☐ Email ☐ Pick up in payroll office

Please note:

- Requests for reprints must come directly from the employee.
- To process this request we require you to provide two forms of identification. Please click on the link below for samples of the acceptable forms.

<https://www.uscis.gov/i-9-central/form-i-9-acceptable-documents>

Signature: _____ Date: _____

Internal Use:
Completed by: _____ Date: _____

Revised 5-2025