

**DUPLICATE FORM W-2 REQUEST**

**COMPANY NAME:** \_\_\_\_\_

**MAIL DUPLICATE TO:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ATTENTION:** Varney & Associates, CPAs, LLC  
\_\_\_\_\_  
**FAX No.:** 1-785-537-1877  
\_\_\_\_\_

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

**EMPLOYEE NAME:** \_\_\_\_\_  
**SOCIAL SECURITY No.:** \_\_\_\_\_  
**MAILING ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Never received original: \_\_\_\_\_  
Misplaced or Destroyed: \_\_\_\_\_  
SSN or Name Incorrect: \_\_\_\_\_  
Other (explain): \_\_\_\_\_

I authorize that \$\_\_\_\_\_ be deducted from my next pay to receive this  
payroll department service.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Employee's name printed

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**PAYROLL DEPARTMENT USE ONLY:**

Date request rec'd: \_\_\_\_\_  
Processed by: \_\_\_\_\_  
Original W-2 remailed: \_\_\_\_\_  
Duplicate W-2 reissued: \_\_\_\_\_