REQUEST FOR REPLACEMENT FORM W-2

Mail or Deliver to: City of Birmingham Finance Department

PAYROLL & PENSION ADMINISTRATION 710 North 20th Street, Room 189 City Hall

Birmingham AL 35203

PLEASE PRINT

Name:								
Employee ID Num	yee ID Number: Dept:							
Current Mailing A	ddress:							
City, State, Zip:								
Phone:		Alternate	Phone: _					
I hereby request a r year(s):	eplacement V	Wage and Tax Sta	atement (Form W-2) for the	following tax			
(Note: You may only obtain be obtained by submitting F			the two previo	ous years. For prior years,	replacements may			
I understand that the receive.	here is a char	ge of \$5.00 for <u>es</u>	ach replac	cement Form W-2	that I request /			
I request that the form	m(s) be deliver	red in the followi	ng manner	r:				
Mailed to addres	ss above	Picked up from	n Payroll	Sent to Payroll	Coordinator			
		Signature of l	Employee		Date			
FOR FINANCE DEP		•	oleted by	CENTRAL CASHIE	ER			
Total Paid \$	Reco	eived By		Receipt No				
FOR FINANCE DEPARTMENT USE – to be completed by PAYROLL								
M	ailed	☐ Picked Up		Sent Interoffice				
Proce	essed by		Date	e				