

**REQUEST FOR REISSUED W-2 FORM**

Name: \_\_\_\_\_ Last 4 Digits of SSN: \_\_\_\_\_  
Agency Code: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Department: \_\_\_\_\_ E-mail: \_\_\_\_\_

**CURRENT MAILING ADDRESS (we will update our records):**

Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

**DO YOU WANT YOUR W-2:** \_\_\_\_\_ Picked up or \_\_\_\_\_ Mailed

**Year(s) of W-2(s) Needed:** \_\_\_\_\_

**REASON FOR THE REISSUED W-2:**

\_\_\_\_\_ Never Received \_\_\_\_\_ Misplaced or Destroyed  
\_\_\_\_\_ Other – Explain: \_\_\_\_\_

**Please note: All duplicate W-2 forms are subject to the authorization of the Office of the State Comptroller. Our office has the capability to reissue W-2 forms within a 5- year window. All other duplicate W-2s are processed by the Office of the State Comptroller, and will be mailed to our office via the USPS. Please allow 30 days for processing. Our office will contact you as soon as your duplicate form arrives.**

**To process this request for a reissued W-2, we must have an original signature on this request form, so please do not submit electronically. Electronically transmitting reissued W-2 forms is a violation of our confidentiality policy; therefore, reissued W-2 forms will not be scanned, faxed, or emailed by this office.** Please contact Cheryl Robinson [clrobin@binghamton.edu](mailto:clrobin@binghamton.edu) with questions regarding this policy.

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

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**For Department Use Only**

Tax statement reissued on: \_\_\_\_\_ Processed by: \_\_\_\_\_