

TRACY UNIFIED SCHOOL DISTRICT REQUEST FOR PRINTOUTS/COPIES/W-2

PLEASE COMPLETE THE INFORMATION BELOW AND **SCHEDULE AN APPOINTMENT** WITH YOUR PAYROLL TECHNICIAN TO HAVE THE REQUESTED FORM(S) PRINTED/COPIED. BRING THIS FORM, YOUR DISTRICT ID OR DRIVERS LICENSE AND CASH PAYMENT WITH YOU TO YOUR SCHEDULED APPOINTMENT.

CHARGE FOR PRINTOUTS OR COPIES: \$.25 PER PAGE
CHARGE FOR W-2: \$2.50 EACH

Last names beginning:			
A-Coo	Malinda Bledsaw	mbledsaw@tusd.net	830-3200 ext. 1117
Cop-G	Patricia Balatayo	pbalatayo@tusd.net	830-3200 ext. 1114
H-Mem	Jocelyne Verdugo	jverdugo@tusd.net	830-3200 ext. 1123
Men-Rod	Gladys Febre	gfebre@tusd.net	830-3200 ext. 1115
Roe-Z	Ana Lopez	alopez@tusd.net	830-3200 ext. 1118

Date of Appointment: _____ Time: _____

If you cannot keep your appointment, please contact Payroll to cancel or reschedule.

Name: _____ ID#: _____

*Address: _____

Phone: _____ Site: _____

I am requesting printouts of:

- paystubs for the month(s) of _____
- a replacement Form W-2 for the tax year (s) _____
- other (please specify) _____

* *Note: if the address listed is a new mailing address, you must **also** submit a change of address form. This form will **NOT** change your address in the HR/Payroll system.*

Employee Signature _____ Date _____