

PINELLAS COUNTY SCHOOLS
REQUEST FOR IRS FORM W-2

Mail to: Pinellas County Schools
Payroll Department
P.O. Box 2942
Largo, FL 33779-2942
Or Fax: (727) 588-6397

Please print clearly:

Please reissue a Wage and Tax Statement (W-2) for the following employee, for the tax year(s) _____.

Employee Name: _____

Social Security Number: (last 4 digits) _____

Telephone Number: Home: _____ Work: _____

Employee's Current Mailing Address:

Street Address: _____

City: _____ State: _____ Zip: _____

I request my W-2 be sent by: (choose one option)

___ Mail to the address above

___ Fax to _____

___ Pony to _____

___ E-mail to _____

___ I will pick up

Employee Signature

Date

Department Use Only

W-2 Reissued on: _____ Processed by: _____