

Request for Duplicate, Corrected, or Prior Year W-2, Wage and Tax Statement

Email to: Leave, Payroll, & Workforce Support Branch
Workforce Relations Division
OD, Office of Human Resources
[Assigned](#) Payroll Liaison

From: _____

Phone: _____

Request for:

___ Duplicate W-2 from HHS (service prior to 4/10/2005) *

___ Duplicate W-2 from DFAS (do not have access to myPay) (service beginning 4/10/2005 to present) **

___ Corrected HHS W-2* (justification required): _____

___ Corrected DFAS W-2** (justification required): _____

___ Prior Year(s) W-2:

Year(s): _____

Employee's Name: _____

SSN: _____

Current Address: _____

Address to send W-2 (if different from above): _____

Completed by: _____ **Date:** _____