CLEAR F	ORM	
Mail to:	Auburn University Human Resources Payroll & Employee Benefits 1550 East Glenn Ave Auburn University, AL 36830	Date of Request
Fax:	334-844-1799	
Email:	payroll@auburn.edu	
	REQUEST FOR REISSUED	IRS FORM W-2
	PLEASE PRINT or Fill i	n Online
Please reiss	sue my WAGE AND TAX STATEMENT (Fo	rm W-2) for the tax year
EMPLOYE	EE NAME:	
BANNER	ID or EMPLOYEE # (902 or 903):	
CURRENT	MAILING ADDRESS:	
	CITY:	
DAYTIME	PHONE NUMBER:	
Current em	ployment status with Auburn University:	Active
Mail t	o above address	for pickup (picture ID required)
Signa	ature of Employee	
For Payro	ll & Employee Benefits use only:	

Date W-2 reissued: Mailed: _____ Date Processed by:

Picked up: ______Signature