



ANNE ARUNDEL COUNTY PUBLIC SCHOOLS

REQUEST FOR DUPLICATE FORM W-2 FOR TAX YEAR: _____ / _____

FEE: \$15 per duplicate (year) (year)
(Increase effective 2-15-06)

Please return this form to: Anne Arundel County Public Schools
Human Resources/Payroll
2644 Riva Road
Annapolis, MD 21401
Fax: (410) 222-5610

Please issue a duplicate copy of the Wage and Tax Statement (Form W-2) for the following employee:

Employee Name: _____ Soc. Sec. #: _____

Work Location: _____

Distribution of W-2 (circle one): Pick-Up From Payroll Mail

If mail, send W-2 to: _____
(street)

(city) (state) (zip code)

Former employee: Submit \$15 fee by check or money order payable to AACPS. HR/Payroll cannot accept cash.

Current employee: I authorize the fee of \$15 to be automatically deducted from my next check.

Signature: _____

If picking up the duplicate W-2 in person, please bring in picture ID such as driver's license or ID badge.

Allow 5 business days to process your request.

For HR/Payroll Department Use Only:

Date request received: _____ Date W-2 mailed to employee: _____

W-2 picked up by employee: _____
(employee signature and date)