REQUEST for W-2 REPLACEMENT FORM

Please complete, print and

should be either fax

	Security	Minber:
E ID #		

Raso n for replacement:

I have lost / misplaced my W-2 Form and understand that a 5.00 replacement fee will be charged. I did not receive my W-2 due to an address change. (No fee will be charged for replacement).

I wish to pay for my replacement form through payroll deduction. By signing below, I authorize a deduction to be made by the Birdville Independent School District on my next pay voucher.