



# California State University, Fresno Auxiliary Corporations

Association     Foundation     Prog. For Children     ASI     Ag

## Request for Duplicate Form W-2 for Tax Year 2007

Please return this form to:    CSU, Fresno Auxiliary Corporations  
Payroll Department M/S OF 33  
2771 E. Shaw Ave.  
Fresno, CA 93710  
Fax (559) 278-0993

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

Employee Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Distribution of form:     Pick up at Auxiliary Payroll Department

Mail to:

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Reason for request:     Never received in mail

Lost/Misplaced/Destroyed

Address changed

Signature of Employee: \_\_\_\_\_ Date: \_\_\_\_\_

If requesting that the form be mailed, please provide copy of picture identification such as driver's license or employee ID along with this request form. If picking up the duplicate Form W-2 in person, please be prepared to show picture identification. **Allow five business days to process your request.**

For Payroll Department Use Only:

Requested: \_\_\_\_\_ Completed: \_\_\_\_\_ Processed by: \_\_\_\_\_