

Request for Replacement of Tax Forms.

Seattle Community Colleges only.

To request a replacement copy of your Tax Form, please provide the information below. Please print neatly, and make sure you sign and date the form at the bottom of the page.

Form Requested: (Please circle needed form): W2 1099R 1098T	Your Legal Name:
Tax Year Requested:	Your Social Security Number (or ITIN if any):

Please indicate below how you would like to receive your replacement Tax Form:

<input type="checkbox"/>	I will pick it up at the Seattle Community Colleges Payroll Office in 2 business days.
<input type="checkbox"/>	Please mail it to me at the address below.

Please provide your current mailing address and a telephone number where you can be reached during the day. Due to confidentiality issues, tax forms will not be faxed.

Street Address			
City			
State/Province		Country:	Zip/Postal Code:
Daytime Telephone #		E-mail address (For notification only)	

Is this a new address?	Yes		Has it been changed with Dept. Records?	Yes	
	No			No	

Your signature	
Date	

Please forward the completed form to:

Seattle Community Colleges
Attn: Payroll Office
1500 Harvard Ave.
Seattle, WA 98122

Or

Fax to (206) 934-4158

For Office Use Only

<input type="checkbox"/>	Original W2 Reissued	Date	
<input type="checkbox"/>	Duplicate W2 Reprinted and Reissued	Date	