

HILLSBOROUGH

Community College 

Mail to: Hillsborough Community College
Attn: Payroll
P. O. Box 31127
Tampa, FL 33631-3127

Phone: (813) 253-7099
Fax No: (813) 253-7558

Request for IRS Form W-2 Please Print

Please reissue Form W-2 for the tax year ending _____

Name: _____

Employee ID # _____

Distribution: Mailing Address

Street: _____

City: _____ St: _____ Zip: _____

Or: Work Location

BR _____ DM _____ DAO _____ MD _____ PC _____ SS _____ YB _____ Pick-up at Payroll _____

The Form W-2 is requested for the following reason:

_____ Never Received

_____ Misplaced or Destroyed

_____ Social Security Number or Name Incorrect

_____ Other

Signature

Date

=====

For Payroll Use Only

Received: _____

Processed by: _____

Original Re-mailed: _____

Duplicate Reissued: _____

(Rev. 02/08)