DAS/HUMAN RESOURCES DIVISION

REQUEST FOR W-2C

Mail To: Marcella Harper, W-2 Coordinator
DAS/Human Resources Division
Payroll Deductions - 27th Floor
30 East Broad Street
Columbus, Ohio 43215
Fax (614) 466-5127

Please issue a W-2C for the tax year ending December 31, 20_____ (Please print)

Employee Name _____ EMPLID _____

Legal Social Security Number _____

Agency Payroll # __ __ __ -- __ __ __

Payroll Contact Person _____ Telephone #_____

CORRECTIONS TO BE MADE (please check box indicated)

☐ Incorrect SS# _____(attach legible copy of SS card)

☐ Incorrect Name _____(attach legible copy of SS card w/correct name)

☐ Incorrect City Name _____ Correct City Name_____
Amt _____ Amt _____
Gross _____ Gross _____

CANCELLATIONS

☐ Warrant PPE_____ ☐ Buyback PPE_____ ☐ Cancelled EFT PPE_____
(If submitting an earnings adjustment please place on refund/adjustment form with CAS Coding)

☐ Other Comment/Changes_____
_____
_____
_____

For Human Resources Division /Deductions Use Only

Date Received_____ Date W-2C Issued_____

Date W-2C sent to SSA _____ Processed By _____