



# THE NAVAJO NATION

P.O. Box 3150

Window Rock, Arizona 86515

928-871-6398

Russell Begaye  
President

Jonathan Nez  
Vice-President

## REQUEST FOR IRS FORM (W2)

**ATTN: Office of the Controller, Payroll Section**

Please re-issue a WAGE/TAX STATEMENT (Form W-2) for the following employee for TAX YEAR ENDING 20\_\_\_\_\_

**NAME:** \_\_\_\_\_

**SOCIAL SECURITY #** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**CURRENT MAILING ADDRESS:**

P.O. Box/Street Address: \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**WORK LOCATION AND DEPARTMENT NUMBER: (LAST EMPLOYEMENT)**

**Department Name:** \_\_\_\_\_

**Department Number:** \_\_\_\_\_

**THE FORM W-2 REQUESTED FOR THE FOLLOWING REASON:**

- Never Received
  Misplaced or Destroyed  
 Social Security # or Name Incorrect
  Other (Explain) \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**FOR PAYROLL DEPARTMENT USE ONLY:**

Processed by: \_\_\_\_\_  
**Payroll Personnel** **Date**

Mailed/Picked up by: \_\_\_\_\_  
**Employee Signature** **Date**