

Provide the years for which you want a duplicate W-2 (up to three):					
Requestor Information					
Name	Last four digits of SSI	N	Z Number		
Phone	Email				
At this time, duplicate W-2s will only be emailed.					
<ul> <li>Due to confidentiality, W-2s will not be faxed.</li> <li>All W-2s emailed within the Yellow Network will be sent using encrypted email via transfer.lanl.gov.</li> <li>All W-2s for those outside of the Yellow Network will be emailed as a password protected file. The password will be the full SSN with dashes.</li> </ul>					
Signature					
Employee Name	Z Number	Sig	nature and Date	•	

Please return this form to tax@lanl.gov (send form as attachment).