

## Email or mail completed forms to:

ABM Industries, Inc. 14141 Southwest Freeway Suite 425 Sugar Land, TX 77478

> Telephone: 1-855-226-3676 Email: abmw2@abm.com

## W-2 Reissue Form

<b>Employee Information</b>	*ΔII Fmnlovee In	formation in this section is REQUIRE	D*
Employee Name:			
Current Street Address:			<u></u>
City:	State:	Zip Code:_	
Telephone:	Email Address:		
Social Security No.:	ecurity No.: Date of Birth:		
Will be used for verification purposes.			
W-2 Information:  All individuals requesting a W-2 must include a copy of a government issued ID for verification purposes. No W-2s will be reissued without proper photo ID.  Please circle the year(s) in which you are requesting a W-2			
2018 2017 \$25.00 Fee	2016 * \$25.00 Fee*	Other:\$25.00 Fee* for	
I would like to receive my W-2 via (circle <u>only</u> one)	Email (provided above)	Mail (provided above)	
Please select reason for request:			
Moved/Change of Address	Lost or Destroyed	Nothing Changed, I didn't receive W-2 in the mail	Other
If "Other", Please Specify			
Authorized Signature			
By signing below, I certify all information I provided on this form is true and correct to the best of my knowledge.			
Employee Signature		Date	
For Payroll Dept. Use Only			
Verified By:	Date Received:		
W-2 Reissue Date:		☐ Emailed	☐ Mailed