

W2/1095-C REQUEST FORM

ACT1 Group of Companies

TAX YEAR(S) REQUESTED	Branch/Location in which you were registered (I.E.–Las Vegas/NV)	
EMPLOYEE NAME (Last, First, Middle Initial)	Last Four of Social Security Number XXX - XX -	
Daytime Telephone () -		
PLEASE NOTE: It takes approximately 7-10 business days to process requests. You will be notified if we are unable to accommodate your request for any reason. Please refrain from calling or submitting multiple copies of the same request as this will only slow down the process.		
How would you like to receive your W2/1095-C? <u>Please check one of the following:</u>		
<input type="checkbox"/> MAIL: Send via regular mail to the mailing address indicated below.		
Street Address (Street Address, Apt#)		
City	State	Zip Code
<input type="checkbox"/> Secure EMAIL: *** Will be sent via secured email. (Click on "Read Message" box and you will be asked to sign-in or use a one-time passcode).		
Email Address:		
<input checked="" type="checkbox"/> PEOPLE PORTAL: Tax documents starting from 2020 are readily available in the People Portal. Please log in to your People Portal, click on Tax Document icon, opt-in to view tax documents electronically.		
I HEREBY AUTHORIZE Act1 Group TO RELEASE A COPY OF MY W-2/1095-C FORM IN THE MANNER INDICATED ABOVE. *** By signing this form, I release Act1 Group from any liability for sending a copy of my W-2 form electronically.		
Signature	Date	

Please email this form to your office **or** mail directly to:

**P.O. Box 29048
Glendale, CA. 91209-9048
Attn: W2 Request Department**

CORPORATE USE ONLY	
Request Received	
Action Taken	<input type="checkbox"/> W2 Mailed <input type="checkbox"/> Secure Email
	<input type="checkbox"/> W2/1095-C Not Found for year requested
	<input type="checkbox"/> Corrected W2/1095-C Needed
Processed by	Date Processed