



W-2 Email or Fax Authorization Form

PLEASE NOTE

Your W-2 can be accessed and printed through the UltiPro portal. Please contact your supervisor or Ulti Support at 1-855-285-1198 option 1, for questions or account assistance.

PLEASE PRINT

Date: _____

Name: _____
First MI Last

Phone Number: _____ - _____ - _____ Last 4 of SSN: _____

Company Name (as it appears on pay stub): _____

Year(s) Needed: _____

Authorization Statement:

I _____ authorize InfoSync Services to email / fax (**circle one**) copy(s) of my W-2 to the email address or fax number provided. In signing this form, I release InfoSync Services from any potential liability associated with emailing or faxing documents containing personal information.

Email address: _____

For Fax Only:

Fax Number: _____

Location of where the fax is to be sent: _____

Signature: _____

(Physical signature, typed signatures not accepted)

Submit completed form to w2.report@issvc.com for processing. Processing may take up to 48 hours, requests are processed Monday-Friday