



CITY OF FLINT, MICHIGAN
Department of Finance

TO: Payroll Department

FROM:

DEPARTMENT:

RE: REQUEST FOR INFORMATION

I, _____ request that you provide me a copy of
the following:

_____ **PRIOR YEAR W-2 (Active - last 7 years only)**

Year(s) _____

_____ **OTHER:** _____

Signed: _____

Dated: _____

Phone: _____