

W-2 Consent for E-Mail Delivery

☐ Consent to receive Form W-2 as an attachment to an e-mail ☐ Change of Consent – I no longer wish to receive my W-2 via e-mail	
PLEASE PRINT CLEARLY	
Employee Name:	Last four digits of SSN:
Your W-2 will be sent to your Primary E-Mail Address as listed in your Employee Master record. <u>If you have your check direct deposited, your Payroll Advice uses this same address for e-mail delivery</u> . You can change this on the Employee Self Service website at any time.	
The W-2 document is password protect	ted. To open the attachment you will need to enter the last four digits of your SSN.
Note: The W-2 form will be a Portable Document Format (PDF) that requires Adobe Acrobat Reader. If you do not already have it installed, you may download a copy free from the following address, http://www.adobe.com/products/acrobat/readstep2.html .	
 receive a paper Form W-2. The only requirement to open the accept password protected attachi This consent will remain in effect release the Town of Holliston to ronly apply to future Form W-2 fo At any time, an employee may retain the consent to receive future Form This consent remains in effect aft Town of Holliston have the ability 	rned to the payroll department for consent to receive a W-2 via e-mail, the employee will PDF attachment will be a copy of Adobe Acrobat Reader. Your e-mail service provider must
Return completed form to:	Town Treasurer – W2 Town of Holliston PO Box 6737 Holliston, MA 01746 Email: treasurer@holliston.k12.ma.us Interoffice Mail: Treasurer-W2
Signature:(By typing your name you are agreeing	Date: to the information on this form.)
For office use only:	

_____ Date Updated in MUNIS _____

Received by: _