Request for Duplicate Form W-2 for Tax Year: *2024*
or previous Year: _____

Please return form by fax, email or mail:

Fax to (225) 208-1248
Email to payroll@cajunusa.com
Mail to: Cajun Industries – Payroll Dept.
P.O. Box 104
Baton Rouge, LA 70821

Please issue a duplicate copy of the Wage and Tax Statement (Form W-2) for the following employee:

Employee Name: _____

Social Security No: _____

Distribution of W-2 Form: (Circle one option – Mail or Email)

Mail to: _____
Street Address

_____
City State Zip Code

Email to: _____

Reason for Request: (Circle one) Never Received Lost/Misplaced

Signature of Employee: _____

Please provide a copy of identification such as driver's license, ID badge, etc. for verification and a phone number in the event we need to contact you regarding this request.

For Payroll Department Use Only:

Date request received: _____ Date duplicate form sent: _____

Received by: _____