



**Gateway  
Community  
Charters**

5112 Arnold Ave  
McClellan, CA 95652

**916-286-5129**  
916-993-4114 fax

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# W-2 Replacement Request Form

Please complete this form (in ink) and submit to Human Resources or Payroll:

Main HR Office Phone (916) 286-5160 Fax: (916) 993-4114

Laura Barragan, HR Coordinator (916) 286-5199 x2089

[Laura.Barragan@GCCCharters.org](mailto:Laura.Barragan@GCCCharters.org)

Annie DeLand, HR Specialist (916) 286-5199 x2065

[Annie.DeLand@GCCCharters.org](mailto:Annie.DeLand@GCCCharters.org)

Nicki Clatte, HR Clerk (916) 286-5160

[Nicki.Clatte@gcccharters.org](mailto:Nicki.Clatte@gcccharters.org)

Bertha Fernandez, Payroll Specialist (916) 286-5199 x2317

[Bertha.Fernandez@gcccharters.org](mailto:Bertha.Fernandez@gcccharters.org)

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

Social Security #: \_\_\_\_\_

W-2 Year(s) Requesting Replacement Copy for: \_\_\_\_\_

Reason for Request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check one:

To be picked up by employee

Email to employee: \_\_\_\_\_

Fax to employee: \_\_\_\_\_

Mail to employee's home:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

Human Resources/Payroll Use Only

Date W-2 Replacement Issued: \_\_\_\_\_

HR/Payroll Signature: \_\_\_\_\_