

REQUEST FOR PERMISSION TO INSPECT MONTHLY WISCONSIN WORKS (W-2) REPORT

Personal information you provide may be used for secondary purposes [Privacy Law, s. 1504 (1)(m). Wisconsin Statutes]

Name – W-2 Agency	Report Month (mm/yy)	<input type="checkbox"/> Public Officer <input type="checkbox"/> Private Individual (If public officer, proceed to Section II)
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NOTE: The report consists of participants' names and their W-2 payment amounts in the preceding month.

Section I: Purpose of Request

Purpose of Inspection	Detailed Description of the Request
<input type="checkbox"/> Educational	
<input type="checkbox"/> Organizational	
<input type="checkbox"/> Governmental	
<input type="checkbox"/> Research	
<input type="checkbox"/> Other	

I understand that, according to the Wisconsin Statutes, section 49.83, it is unlawful to use any information obtained through access to this report for political or commercial purposes, and that a violation of this section is punishable by a fine of no less than \$25 nor more than \$500, or by imprisonment of no less than 10 days nor more than one year, or both.

I also understand that the person(s) included in the report I inspect will be notified that I have inspected it, and provided my name and address.

Section II: Provide the Following Information; Please Print

Name of Requester		Telephone Number
Name of Employer		
Address of Requester		
City	State	Zip Code
Signature - Requester <i>(Not required for Public Official)</i>		Date Signed
Type of Identification Provided <i>(Not required for Public Official)</i>		W-2 Staff who Verified ID