



**592B**

**UCLA Online Tax Request Form**

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

Signature: \_\_\_\_\_

**COMPANY VENDORS ONLY:**

Company Name: \_\_\_\_\_ Federal ID# \_\_\_\_\_

Contact Person: \_\_\_\_\_

**For All Requests please fill in:**

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Email Address For Confirmation Only: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CHECK FORM(S) REQUESTING:**

- Duplicate copy of 592B (State Withholding for out of state vendors )
- Correction to 592B form
- Please call me regarding 592B

1099R (Retirement) Call -1-800-888-8267 ext 70651

Hope Scholarship (Students Only) 1-877-467-3821 or [www.Ters.com](http://www.Ters.com)

- Mail form(s) to address above
- Fax form(s) to fax# above

**\*\*\*Mailing or faxing forms require a photo ID along with the request form. \*\*\***

**\*\*\*\*\*Forms mailed and fax within 7 business days\*\*\*\*\***

**PLEASE FAX TO UCLA ACCTS PAYABLE OFFICE ATTN: SHIRLEY SAMS (310) 794-8513 or mail her attn at: UCLA Accounts Payable OFC**

**10920 Wilshire Ctr 5<sup>th</sup> FL  
Los Angeles CA 90024**

