



# Crew & Talent - Inquiries and Corrections

Please fill out this form, print, sign, and return to EP Payment Support via:

- Email: [paymentsupport@ep.com](mailto:paymentsupport@ep.com)
- Fax: 818.688.0486

## Employee Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Corporation Name (if applicable): \_\_\_\_\_ Corp Tax ID: \_\_\_\_\_ -  
*For multiple corporations, please complete a separate form for each one.*

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

City: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Email: \_\_\_\_\_

## Approved Representative Information (if applicable)

C/O Representative's Name and Organization (if applicable): \_\_\_\_\_

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

City: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

Representative's Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Please indicate type of inquiry and tax year:

- |  |  |
|--|--|
| <input type="checkbox"/> Earnings Report Personal Use    | <input type="checkbox"/> Loan Out Corporation Correction** |
| <input type="checkbox"/> Name/SSN Correction*            | <input type="checkbox"/> Reimbursement Policy Letter       |
| <input type="checkbox"/> Tax Form Copy (specify below)   | <input type="checkbox"/> Pension Letter (W2)               |
| <input type="checkbox"/> Tax Form Correction W2/1099/W2c | <input type="checkbox"/> Other                             |

Tax Year

\* For Name/Social Security number correction, please attach a copy of your Social Security Card

\*\* For Corporation Name/Tax ID correction please attach Federal & State proof. For dissolution, mergers etc., attach proof of dissolution.

Tax Form copy needed (specify what form type: W-2, 1099, Canadian, G2FP, 592b, W2c etc.): \_\_\_\_\_

\*7years of historical tax statements are available.

For all other inquiries, please provide additional information as needed:

Please check one delivery method:  E-mail  Mail

Signature\*: \_\_\_\_\_ Relation to employee\* \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name (Required if employee is a minor): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\* If you are the employee, state "self" under relation. If you are signing on behalf of a business, state your title (i.e., Business Manager, Bookkeeper, etc.). If you are signing on behalf of another person, state your relationship (i.e., Personal Representative, Spouse, Parent, etc.). Attach a copy of your appointment as business/personal representative, power of attorney, etc., as applicable.**

PLEASE NOTE: EP requires a "wet signature" from the employee or their approved representative on file. However, EP will accept a markup signature from an iPhone or Android.