

# Comptroller of Maryland W2/1099 Bulk File Transmission Access Request Form

email completed form to: [efilew21099help@marylandtaxes.gov](mailto:efilew21099help@marylandtaxes.gov)

Date:

Analyst (entered by):

For Comptroller of MD Office Use Only

Bulk Upload File Type:            W2                    1099                    Both

Requestor Name:

Requestor Email:

Requestor Phone Number:

MDTaxConnect  
Registered  
Transmitter  
Confirmation  
Number(s):

Business Name:

Business Address:  
(Including City,  
State, Zip code)

Comments / Notes:

Effective Date: