

Employer identification number: 53-6002523 F

Washington, DC 20515

NAME DOE JOHN LEONARD
Last First Middle

If your last name differs from that on you social security card, call 1-800-772-1213.

ADDRESS 123 MAIN STREET
ANYTOWN, XX 00000-0000

SOCIAL SECURITY NUMBER 111-11-1111

FEDERAL TAX WITHHOLDING

Marital Status: [] Single [X] Married [] Married, but withhold at higher Single rate

Note: If married, but legally separated, or spouse is a nonresident alien, check the Single block.

Total number of allowances you are claiming 02
Additional amount, if any, you want deducted from each paycheck \$ -

I claim exemption from withholding for 1996 and I certify that I meet BOTH of the following conditions for exemption:

- Last year I had a right to a refund of ALL Federal income tax withheld because I had NO tax liability; AND
• This year I expect a refund of ALL Federal income tax withheld because I expect to have NO tax liability.

If you meet both conditions, enter "EXEMPT" here > > > > > > > > > > >

Under penalties of perjury, I certify that I am entitled to the number of withholding allowances claimed on this certificate or entitled to claim exempt status.

Employee's Signature X Date 01-03 19 97

STATE TAX WITHHOLDING **

I authorize the following action regarding State Income Tax Withholding:

- (1) [] Begin Withholding (2) [X] Change Existing Deduction (3) [] Stop Withholding

Complete the following information only if Box 1 or 2 is checked above.

STATE: XX State Abbreviation (see reverse): XX

Marital Status: [] Single [X] Married

Total number of allowances you are claiming 02
Additional amount, if any, you want deducted from each paycheck \$ -

Employee's Signature X Date 01-03 19 97

** Withholding of State taxes is a voluntary program with the House of Representatives. However, employees should pay estimated State taxes in accordance with State law (see reverse).