

City of Bristol, CT - RETIREES

FEDERAL Withholding Tax Election

Retirees name (Print)

XXX-XX-_____
Social Security #

Do you want Federal Income Tax withheld? Circle one **YES** **NO**



If YES

complete this section

OR

this section

FLAT AMOUNT ELECTION

Tax to be withheld
per check:\$ _____

- X
- X
- X
- X
- X
- X
- X
- X
- X

FEDERAL TAX TABLE ELECTION

Marital Status: Single____
Married____
Total # of allowances claimed _____
Extra withholding (if any) \$ _____

Retirees Signature: _____ Date: _____

Effective Date: _____

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2009

Return to: Treasurer's Office
111 North Main ST
Bristol, CT 06010
Fax # 584-6283