

DEDUCTION OF CITY INCOME TAX

In accordance with the city of _____ Income Tax, I hereby authorize the deduction this city tax from my payroll check. This deduction will remain in effect until written notice is given by the employee to the Treasurer to terminate such tax. The applicable tax rate for the above mentioned city is _____.

Date

Employee Signature

Resident: ___ Yes ___ No

Address

Assigned within
Municipality: ___ Yes ___ No

City, State, Zip

Revised 5/05

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