



# Carpenters Southwest Administrative Corporation

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www.carpenterssw.org

## STATE OF CALIFORNIA

### INCOME TAX WITHHOLDING ELECTION FORM

Please check either line 1 or line 2 below. Sign and date this form and return it to us if required.

1. \_\_\_\_\_ No, I do not want State income tax withheld from my payment.
2. \_\_\_\_\_ Yes, I do want State income tax withheld from my payment (Minimum of \$10.00).

If you have checked line 2, we will withhold State income tax from each payment in an amount equal to 10% of the Federal tax withheld, or if you have elected not to have Federal tax withholding, the amount due based on appropriate Federal tax tables. If you would like a different amount withheld, please complete item 3 or 4 below.

3. \_\_\_\_\_ In addition to an amount equal to 10% of the Federal tax withheld, I would like the following amount withheld from each payment: \$ \_\_\_\_\_ .
4. \_\_\_\_\_ Withhold a flat amount \$ \_\_\_\_\_ from each payment instead of the amount equal to 10% of the Federal tax withheld.

Your Signature: \_\_\_\_\_

SSN: \_\_\_\_\_

Date: \_\_\_\_\_

You may change or revoke a previously filed election by filing a new election.

**Arizona**  
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 4547 W. McDowell Rd. Ste. 6  
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**Nevada**  
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