

Orange County Employees Retirement System

P.O. Box 1229, Santa Ana, CA 92702 (714) 558-6200 www.ocers.org

TAX WITHHOLDING ELECTION FORM FOR PERIODIC PAYMENTS

Section 1: Member Information (Please Print)					
1. Last Name		2. First Name		3. Home/Cell Number	
4. Social Security Number 5. Personal Email Address			☐ Service Retirement		
			☐ Retiree Death Payment -		
				Survivorship	
				☐ DRO Payment	
Section 2: Recipient Information (Complete if different from above)					
6. Last Name 7. First Name		•		8. Middle Name	
		7. That Name		o. Ivildale Ivalile	
9. Social Security Number 10.		Personal Email Address		11. Home/Cell Number	
Section 3: Your benefit from OCERS is subject to federal and California state income taxes. OCERS will withhold funds for these taxes					
Election of	unless you elect not to have withholdings apply.				
Federal and State Income	IEVOLI DO NOT MAKE AN ELECTION. EEDEDAL AND CALIFORNIA CTATE INCOMETAVAMUL BEAUTILIJE D. BACED ON THE DE				
Tax	IF YOU DO NOT MAKE AN ELECTION, FEDERAL AND CALIFORNIA STATE INCOME TAX WILL BE WITHHELD BASED ON THEIRS				
Withholding	AND CA-FTB REQUIRED DEFAULT ELECTION OF SINGLE WITH NO ADJUSTMENTS.				
	Please note that if you do not have taxes withheld from your benefit, you may have to pay estimated taxes. You may incur				
	penalties if your withholdings or estimated tax payments are not sufficient.				
	☐ New Request		☐ Change Request		
	Check the appropriate box(s) below:				
	(A)				
	_			(B)	
		deral Withholding Election:		State Withholding Election:	
			☐ No withholding - DO	State Withholding Election: NOT withhold state income tax	
	☐ I am submitting a	deral Withholding Election:	☐ No withholding - DO☐ Flat dollar amount —	State Withholding Election: NOT withhold state income tax Withhold \$	
	☐ I am submitting a The form can be four	deral Withholding Election: completed IRS W-4P form.	☐ No withholding - DO☐ Flat dollar amount —☐ Tax table — Withhold	State Withholding Election: NOT withhold state income tax Withhold \$	
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Section 4: Rec	☐ I am submitting a The form can be four	deral Withholding Election: completed IRS W-4P form. Ind at the following URL: pub/irs-pdf/fw4p.pdf	□ No withholding - DO □ Flat dollar amount - □ Tax table - Withhold payment according to rexemptions as I have in Filing status: □ Head □ Marrie □ Single Number of □ Tax table plus extra from each benefit payr the number of exemptions.	State Withholding Election: NOT withhold state income tax Withhold \$	
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