

# PEACE OFFICERS' ANNUITY & BENEFIT FUND OF GA

P.O. BOX 56, GRIFFIN, GA 30224  
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## Income Tax Withholding Declaration

Member Name: \_\_\_\_\_

Member #: \_\_\_\_\_ SSN: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*Street/ Rural Route/ P.O. Box*

\_\_\_\_\_  
*City, State and Zip Code*

***The Peace Officers' Annuity and Benefit Fund is not the primary pension benefit received by many of its members and many of the monthly pension checks we issue are not large enough to require that Federal and State Income Tax be withheld. However, many retirees desire to have Federal and/ or State Income Tax withheld from their monthly pension check.***

INSTRUCTIONS: PLEASE INITIAL YOUR SELECTION FOR TAX DEDUCTIONS BELOW. PLEASE BE AWARE THAT YOU MUST PROVIDE A SPECIFIC DOLLAR AMOUNT OR PERCENTAGE SHOULD YOU CHOOSE TO WITHHOLD TAXES FROM YOUR PENSION.

<b><i>FEDERAL TAX WITHHOLDING DECLARATION</i></b>	<b><i>STATE TAX WITHHOLDING DECLARATION</i></b>
<p>I choose to have <b>federal</b> income tax withheld from my pension monthly in the following amount or percentage: _____</p> <p>I do not want to have <b>federal</b> taxes withheld from my pension _____</p>	<p>I choose to have <b>state</b> income tax withheld from my pension monthly in the following amount or percentage: _____</p> <p>I do not want to have <b>state</b> taxes withheld from my pension _____</p> <p>I live in a state that does not require state income tax. _____</p>

Signature

Date