## EMPLOYEE'S WITHHOLDING CERTIFICATE FOR THE CITY OF PORTLAND INCOME TAX

	PW-4					
Na	1. Print Full Name		Social S	Security Number		
	2. Address		City		State	Zip
	Resident Non Resident				•	
Γ	EMPLOYEE: File this form with your	3. Exemptions for	yourse	elf		
	employer. Otherwise, they must withhold CITY OF PORTLAND income	4. Exemptions for your spouse				
	tax from your earnings without exemptions.  EMPLOYER: Keep this certificate with your records. If the information	5. Exemptions for your children or other dependents				
		6. Add the number of exemptions which you have claimed on lines 3, 4, and 5 above and write the total				
	submitted by the employee is not believed to be true, correct and	7. Enter a dollar amount for extra withholding				
	complete, the Administrator must be so advised.	I certify that the information submitted on this certificate is true, correct and complete the best of my knowledge and belief				
		Date		Signature		
	EMPLOYE	ESO WITHING DING OFF	TIE10 A TE	: FOR THE CITY OF BORT! AND IN	IOOME T	w
	PW-4	E'S WITHHOLDING CER		FOR THE CITY OF PORTLAND IN	ICOME 14	4X
Na	1. Print Full Name		Social S	Security Number		
	2. Address		City		State	Zip
		Resident		Non Resident		
Г	3. Exemptions for yourself					
	EMPLOYEE: File this form with your employer. Otherwise, they must withhold CITY OF PORTLAND income	4. Exemptions for your spouse				
	tax from your earnings without exemptions.	5. Exemptions for your children or other dependents				
	EMPLOYER: Keep this certificate with your records. If the information	6. Add the number of exemptions which you have claimed on lines 3, 4, and 5 above and write the total				
	submitted by the employee is not believed to be true, correct and	7. Enter a dollar amount for extra withholding				
	complete, the Administrator must be so advised.	I certify that the information submitted on this certificate is true, correct and complete to the best of my knowledge and belief				
		Date	g	Signature		
	EMPLOYE PW-4	EE'S WITHHOLDING CER	TIFICATE	FOR THE CITY OF PORTLAND IN	ICOME TA	ΑX
la	1. Print Full Name		Social Security Number			
	2. Address		City		State	Zip
	Resident No	3. Exemptions for	vourse	elf		
	EMPLOYEE: File this form with your employer. Otherwise, they must	4. Exemptions for your spouse				
	withhold CITY OF PORTLAND income tax from your earnings without	5. Exemptions for your children or other dependents				
	exemptions.	6. Add the number of exemptions which you have claimed on				
	EMPLOYER: Keep this certificate with your records. If the information submitted by the employee is not	lines 3, 4, and 5 above and write the total				
	believed to be true, correct and complete, the Administrator must be	7. Enter a dollar amount for extra withholding				
	so advised.	I certify that the information submitted on this certificate is true, correct and complete to the best of my knowledge and belief				
		Date		Signature		