



SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO

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OHIO STATE TAX WITHHOLDING FORM

Select only ONE of the two boxes below:

<input type="checkbox"/>	Box 1 I elect not to have Ohio State income tax withheld from my pension.
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OR

<input type="checkbox"/>	Box 2 Withhold \$ _____ .00 from each benefit check. (Must be at least \$5.00)
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Your Ohio State Tax Withholding selection will remain in force until you change or cancel it by submitting a new Ohio State Tax Withholding Form.

Signature

Date Signed

Social Security Number

Phone Number