CWA/ITU Negotiated Pension Plan

FEDERAL TAX WITHHOLDING FORM FOR PENSIONERS

Please complete and sign this form if you wish to have federal tax withheld from your monthly pension or make a change in the amount already being withheld. Please make sure a dollar amount is specified. If you elect to have no tax withheld, write “0” as the dollar amount. This is a substitute for IRS Form W-4P, Withholding Certificate for Pension or Annuity Payments.

This form can be faxed to 856-793-3105, e-mailed to npp@fmvaccaro.com or mailed to CWA/ITU Negotiated Pension Plan, 27 Roland Avenue, Suite 200, Mount Laurel, NJ 08054-1038.

_________________________    _________________________
Print Name                    Social Security No.

_________________________
Street

_________________________    _________________________
City, State and Zip           Telephone No.

I want the following dollar amount withheld from each monthly pension payment . . . $____________

_________________________    _________________________
Signature of Participant      Date

Send completed form by mail to: CWA/ITU Negotiated Pension Plan
27 Roland Avenue, Suite 200  Mount Laurel, NJ 08054-1038
Phone: 833-776-0731  Fax: 856-793-3105  Email: NPP@fmvaccaro.com