*The City of New York*

**Financial Information Services Agency** **Office of Payroll Administration**

Neil Matthew
Executive Director

# WITHHOLDING CERTIFICATE AFFIRMATION

State of New York )
SS:
County of _____ )

I, _____ being duly sworn, depose and say:

1. My Social Security number is _____.
2. The withholding tax certificate(s), form(s) W-4, IT-2104, or IT-2104E presented by me to the City of New York for processing are to the best of my knowledge truthful and the allowances or exemptions claimed are valid.
3. These certificates are not being filed for the purpose of evading the lawful imposition of income tax upon me by either the Federal, State, or City governments.
4. I understand that: (a) filing a false or fraudulent certificate may result in civil and criminal prosecution and disciplinary action including, but not limited to, termination of employment; (b) I may voluntarily provide substantiation for the withholding amounts or withholding allowances claimed or the basis for my claim of total exemption from tax; (c) that Form W-4 withholding certificates in which total exemption is claimed may be forwarded to the Internal Revenue Service; and (d) all Form IT-2104s in which more than 14 allowances are claimed and all Form IT-2104Es in which total exemption is claimed will be forwarded to the New York State Department of Taxation and Finance.

Employee's Signature _____ Date _____

Sworn to before me this _____ day of _____ , _____.

Notary Public _____

Date _____