# Combined Federal & State Tax Withholding Election Form

For Monthly Recurring Pension Payments

**RETURN THIS FORM TO:**
City of Aurora General Employees’ Retirement Plan  
12100 East Iliff Avenue, Suite 108  
Aurora, Colorado  80014  
Phone (303) 368-9160  
Fax (303) 368-9181  
Email: [info@auroragerp.org](mailto:info@auroragerp.org)

| Name: ________________________________ | Social Security Number: __________________ |
| Street Address: ____________________________ | |
| City: __________________ State: ______ Zip Code: ____________ | |
| State of Residence for withholding purposes: ______ | |
| Phone: __________________ Email Address: ____________________________ | |

**Retiree Signature** _____________________________ **Date** _____________

### FEDERAL TAX ELECTION

**PLEASE CHECK THE APPROPRIATE BOXES:**

- [ ] I do not want federal income tax to be withheld from my pension.
- [ ] I want $______________ per month to be withheld for federal income tax.
- [ ] I want my withholding to be figured using the information provided below:
  - Marital Status:  [ ] Single  [ ] Married
  - [ ] Married, but withhold at higher “Single” rate
  - Number of allowances: ________
  - Additional amount (if any) to be withheld from each pension payment: $__________

### STATE TAX ELECTION

**PLEASE CHECK THE APPROPRIATE BOXES:**

- [ ] I do not want state income tax to be withheld from my pension.
- [ ] I want $______________ per month to be withheld for state income tax.