

# I. E. SHAFFER & Co.

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## IMPORTANT NOTICE CONCERNING TEMPORARY DISABILITY INCOME PAYMENTS

The Internal Revenue Service requires that temporary disability income payments made to you be reported to them as they will be treated as part of your taxable income. As a result, these payments are subject to FICA taxes and federal income taxes. The appropriate deduction will automatically be made from your payments for FICA taxes. If you would like to have federal income tax withheld from your payments, you may request withholding by making this election below.

Please complete and return this election form by selecting either Option A or B below.

**Disability income payments will not start until this form is returned completed.**

Name of Welfare Fund: \_\_\_\_\_

Your Name: \_\_\_\_\_

Your Social Security Number: \_\_\_\_\_

- A)  I do not want to have federal income tax withheld from temporary disability income payments made to me.
- B)  I elect to have \$\_\_\_\_\_ withheld from each temporary disability income payment made to me.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature