



School District Income Tax

Please review the information on the attached sheet regarding the enactment of School District Income Tax.

- a) If you reside in one of the districts requiring the withholding of this tax, **complete the bottom portion of this sheet.**
- b) If **not** residing in one of the affected districts, complete the top portion of this form.

School District

Employee Signature

School District Code

Date

I authorize the deduction of School District Income Tax from my wages as enacted by the voters.

School District

Employee Signature

School District Code: _____

Date