

AUTHORIZATION AGREEMENT FOR TAX WITHHOLDING

<b>EMPLOYEE NAME</b> (PLEASE PRINT)	
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I, the above named retiree, authorize and request, the **Lawrence Retirement Board**, to deduct, the amount stated on this form, from my pension check each month, for Income Tax Purposes.

<b>SIGNATURE</b>	<b>DATE</b>	
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AMOUNT TO BE WITHHELD  
PER MONTH FOR FEDERAL TAX

\* Under Massachusetts Tax Laws your pension is currently not taxable under State Income Taxes.

*It is understood that this agreement may be terminated by myself at any time by written notification to the Lawrence Retirement Board. Any such notification shall be effective only with respect to entries initiated by the Lawrence Retirement Board after receipt of such notification and a reasonable opportunity to act on it.*