

Multiple Jurisdiction Tax Exemption Form

Employee Information				
Employee Name			Personnel Number	
Occupation			Work Telephone Number	
Tax Year				
Tax Year in which this exemption applies				
Certification of Resident City/County/Sta	ite			
Employee Street Address			Home Telephone Number	
City	State		County/School District	
Certification of Exempt Status Due to the nature of my duties, I certify that exempt from state and local taxes other than local income tax by rail carriers. Except fo based employees must also submit a Year exemption is claimed.	n my state of resider in the s	dence, as provided under 4 gineers, conductors, OBS	9 USC § 11502, v and track maint	withholding state and tenance gangs, PHL-
State and/or City	State and/or City		State and/or City	
State and/or City	State and/or City		State and/or City	
I understand that, if it is determined that I an interest and penalties.	m not qualified for	or this exemption; I may be	e responsible for a	a substantial tax liability,
Employee Signature			Date / /	
Supervisor's Statement I confirm that the employee has identified the employee of Amtrak. Supervisor Signature Title:	he jurisdiction(s)	where he/she performs the	eir regularly assig	Date / / Telephone:

Instructions:

This form must be received in Payroll by December1st of each year.

Complete form and obtain signatures. Mail original to:

Manager, Payroll Processing & Inquiry National Railroad Passenger Corporation 10 G Street, NE, 3W-132 Washington, DC 20002

Retain copy for employee's records.

Exemptions expire December 31st of each year and must be renewed annually.