

TEAMSTERS LOCAL 35  
PENSION FUND

ELECTION FOR RECIPIENTS OF PENSION PAYMENTS

Please read the following and check the appropriate box:

- I **DO NOT** wish to have Federal Income Tax withheld from my monthly pension.
- I **DO** wish to have Federal Income Tax withheld from my monthly pension.  
(You can elect to have a flat dollar amount withheld each month, or you can specify a percentage of your monthly benefit payment to be withheld each month. Please indicate amount or percentage withheld below.)

Flat amount or percentage of monthly pension: \$ \_\_\_\_\_ or \_\_\_\_\_ %

Marital Status: \_\_\_\_ Single \_\_\_\_ Married

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed or Typed Name

Return this completed ELECTION FORM to:

Teamsters Local No. 35  
Pension Fund  
620 U.S. Route 130  
Trenton, NJ 08691