

OATH / TAX FORM

Revised: 12/2011

Form W-4 Department of the Treasury Internal Revenue Service	Employee's Withholding Allowance Certificate		OMB No. 1545-0010 2012
1 Type or print your first name and middle initial _____ Last name _____		2 Social Security Number _____	
Home address (number and street or rural route) _____		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note: If married, but legally separated, or spouse is a nonresident alien, check the Single box.	
City or town, state, and ZIP code _____		4 If your last name differs from that on your social security card, check here <input type="checkbox"/> and call 1-800-772-1213 for a new card	
5 Total number of allowances you are claiming (from line H above or from the worksheets if they apply)		5	_____
6 Additional amount, if any, you want withheld from each paycheck		6	\$ _____
7 I claim exemption from withholding for 2012 and I certify that I meet BOTH of the following conditions for exemption: Last year I had a right to a refund of ALL Federal income tax withheld because I had NO tax liability; AND This year I expect a refund of ALL Federal income tax withheld because I expect to have NO tax liability. If you meet both conditions, enter "EXEMPT" here		7	_____
Under penalties of perjury, I certify that I am entitled to the number of withholding allowances claimed on this certificate or entitled to claim exempt status.			
Employee's signature (Form is not valid unless you sign it) _____		Date _____, 20____	
8 Employer's name and address (Employer: Complete 8 and 10 only if sending to the IRS) Wichita State University; 1845 Fairmount; Wichita, Kansas 67260--0038		9 Office Code (Optional)	10 Employer identification number 48-6029925

STATE OF KANSAS EMPLOYEE'S OATH

K.S.A. 75-4308 et seq requires that the following oath from K.S.A. 54-106, be signed by new employees before entering the duties for employment and before funds for services may be disbursed:

I do solemnly swear (or affirm) that I will support the constitution of the United States and the constitution of the State of Kansas, and faithfully discharge the duties of my office of employment. So help me God.

(Employee's Signature)

NOTARY USE ONLY:

State of Kansas
County of Sedgwick

Signed and sworn to (or affirmed) before me this _____ day of _____, 20____, by _____.

My commission expires _____, 20____.

Notary Public _____

Notary Seal