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## Annuitant Request - Illinois State Income Tax Withholding

Name (Last, first, middle)

SSN (last 4) or Member ID

Address (Street, City, State, Zip)

Phone number

(H)

Amount to be withheld from each annuity (pension) payment

(C)

\$

I request and authorize voluntary Illinois income tax withholding from my payment.

*By signing below I certify this information is correct and that I am aware that knowingly making a false statement or falsifying a record in an attempt to defraud JRS is a class 3 felony. I understand that if the JRS Board of Trustees has a reasonable suspicion that an attempt has been made to defraud JRS, it is required to report the matter to the appropriate State's Attorney for investigation.*

Member signature \_\_\_\_\_

Date \_\_\_\_\_