EMPLOYEES SECURITY FUND OF THE ELECTRICAL PRODUCTS INDUSTRIES PENSION PLAN

Federal Tax withholding Notice and Election Form Affecting Periodic Payments

Federal tax law requires that income tax must be withheld from periodic payments unless a participant elects not to have tax withheld. It is important that you complete the appropriate boxes below and return this form in the self-addressed return envelope.

with 2 withholding alloweness		withheld on the basis that you are married
Please complete this portion and	return it in the enclosed self-	addressed envelope.
FEDER	AL TAX WITHHOLDING	<u>GELECTION</u>
Please check the appropriate boxe	es as follows:	
a. () I ELECT NO	Γ TO HAVE Federal incom	e tax withheld from my periodic payments.
	OR	
b. () I ELECT TO	HAVE Federal income tax	withheld from my periodic payments.
If you checked box (b), you must	indicate:	
Either a specific dollar a	amount here \$	
	or	
The total number of withholding	allowances you are claiming	:
Marital Status:	() Single	() Married
Print Name	Soc. Sec.	
Signature	atureDate	
Enc.		

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