

Form  
C-4

Employee's Withholding Exemption Certificate  
(For City of Auburn Occupation License Fee)

Full Name \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(Last) (First) (MI)

Home Address \_\_\_\_\_  
(Number and Street) (City) (State) (Zip Code)

As an employee of Auburn University, my total compensation is earned as a result of services performed both within and without the City of Auburn. I estimate that on **AN ANNUAL AVERAGE** the percentage of the compensation earned from the proportion of the work performed **within** the City is \_\_\_\_\_%.

I certify that to the best of my knowledge and belief, the percentage claimed on this certificate is a valid estimate. I understand that if a change in circumstances should warrant a change in percentage, it will be my obligation to file a revised certificate.

Signature \_\_\_\_\_

Date \_\_\_\_\_