NJ-W-4P (8-96)	CERTIFICATE OF VOLUNTARY WITHHOLDING OF NEW JERSEY GROSS INCOME TAX FROM PENSION AND ANNUITY PAYMENTS		
Type or Print Your Fufl Name			Your Social Security No.
Home Address (No. and Street or Rural Route)			
City or Town	State	Zip Code	Ctaim or ID Number of Your Pension or Annuity Contract
			annuity payment in the amount of amount greater than the minimum.)
Your Signature		Date	
	FORM MAY	BE REPRODUCED	