## This is a sample of PDF fill-in form

Form X-5 Department of Human Resource	Employee xxxxx Certificate Some descriptions of this form.			2006
Type or print your first name and middle initial.		Last nar	ne	Social Security Number
Home address (number and street or rural route)		Single Married  Please see the comments somewhere.		
City or town, state, and ZIP code			If your last name differs from that shown on your social security card, check here	
Total number of allowances you are claiming				
Additional amount, if any, you want to withheld from each pay check				
If you meet some conditions write Exempt here				
Employee's signature		Date		
Employer's name and address			Office code	



