

Employee Withholding Allowance Certificate

COMPTROLLER OF MARYLAND
FOR MARYLAND STATE GOVERNMENT EMPLOYEES WORKING
AND RESIDING IN STATES OTHER THAN MARYLAND
(NOT APPLICABLE FOR PENNSYLVANIA RESIDENTS)

Section 1 – Employee Information

Payroll System (check one) <input type="checkbox"/> RG <input type="checkbox"/> CT <input type="checkbox"/> UM	Name of Employing Agency	
Agency Number	Social Security Number	Employee Name
Home Address – Where I Currently Live/Work (number and street or rural route)		(apartment number, if any)
City	State	Zip Code

Section 2 - Employees Working and Residing in States Other than Maryland.

I certify that I am working and residing in a jurisdiction other than Maryland and I am not subject to tax withholding and/or reporting for Maryland. Under penalties of perjury, I declare that I have read this certificate. To the best of my knowledge and belief, it is true, correct, and complete.		
Month & Year that Permanent Residency Began _____		
1. I am a permanent resident in the state of _____		
2. I am currently residing in the state of _____ (Military Spouses Only)		
_____ Employee's Signature (Must be Original/Wet Signature) (Digital Signature Not Allowed)	_____ Date	_____ Daytime Phone Number

Section 3 – Agency Representative Approval

<i>I attest that our employee lives and works outside of Maryland. We will update their UI state to align with this certificate.</i>	
Printed Name _____	Title _____
Agency Signature _____	Date _____

Employer's name and address (For Employer Use Only) State of Maryland Central Payroll Bureau PO Box 2396 Annapolis, MD 21404	Federal Employer Identification number (EIN)
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Important: The information you supply must be complete. This form will replace in total any certificate you previously submitted.