

FORM W-4 (Rev. July 1959)
U.S. Treasury Department
Internal Revenue Service

EMPLOYEE'S WITHHOLDING EXEMPTION CERTIFICATE

Print full name LEE HARVEY OSWALD Social Security Account Number 433-54-3937
Print home address 2515 WEST 5th ST. City IRVING Zone _____ State TEXAS

DL-25

EMPLOYEE:
Fill this form with your employer. Complete it once with each new employer for whom you wish to claim exemptions.

EMPLOYER:
Keep this certificate with your records. If the employee is incorrect in how exemptions are claimed, the Director should be advised.

HOW TO CLAIM YOUR WITHHOLDING EXEMPTIONS

1. If SINGLE, and you claim an exemption, write the figure "1"
2. If MARRIED, one exemption each is allowable for husband and wife if not claimed on another certificate.
 - (a) If you claim both of these exemptions, write the figure "2"
 - (b) If you claim one of these exemptions, write the figure "1"
 - (c) If you claim neither of these exemptions, write "0"
3. Exemptions for age and blindness (applicable only to you and your wife but not to dependents):
 - (a) If you or your wife will be 65 years of age or older at the end of the year, and you claim this exemption, write "1"; if both will be 65 or older, and you claim both of these exemptions, write "2"
 - (b) If you or your wife are blind, and you claim this exemption, write the figure "1"; if both are blind, and you claim both of these exemptions, write the figure "2"
4. If you claim exemptions for one or more dependents, write the number of such exemptions. (Do not claim exemption for a dependent unless you are qualified under instructions 4 on other side.)
5. Add the number of exemptions which you have claimed above and write the total 2
6. Additional withholding per pay period and agreement with employer. See Instruction 1.

CERTIFY that the number of withholding exemptions claimed on this certificate does not exceed the number to which I am entitled.
(Date) 10/16/63 (Signed) Lee H. Oswald

