

Office of the City Clerk 26000 Evergreen Road P. O. Box 2055 Southfield, Michigan 48037-2055

CITY OF SOUTHFIELD ELECTION INSPECTOR APPLICATION

ANY FALSE STATEMENTS ON THIS APPLICATION WILL DISQUALIFY THE APPLICANT

		Da	ate of Birth//
Home Address	Social Security #		Tel:
E-mail Address			Area of Interest
Political Party Affiliation: (To be e	eligible for appointment you MUST ch	eck one)	Precinct Worker
Democrat O Green Natural Law O Repu	n C Libertarian U.S. Taxpa	/ers •	Absentee Counting Board
Are you a registered voter in the	e State of Michigan? Yes	0	No O
Do you have transportation?	Yes	0	No O
Have you ever been convicted of	f a felony or election crime? Yes	0	No O
	anv: Include name of jurisdiction a		elections
Election Inspector Experience, if			
I CERTIFY THAT I am not a me	ember of a known active advocate CERTIFY THAT the foregoing sta	e* of a politica	al party other than the party
I CERTIFY THAT I am not a me identified above. I FURTHER (ember of a known active advocate CERTIFY THAT the foregoing sta	e* of a politica tements are to	al party other than the party rue to the best of my knowled

Please return form to:

State of Michigan New Hire Reporting Form

Federal law requires public (State and local) and private employers to report all newly hired or rehired employees who are working in Michigan to the State of Michigan. This form is recommended for use by all employers who do not report electronically.

Michigan New Hire Operations Center P.O. Box 85010

Lansing, MI 48908-5010 Phone: (800) 524-9846 Fax: (877) 318-1659

- A newly hired employee is an individual not previously employed by you, and a rehired employee is an individual who was previously employed by you but separated from employment for at least 60 consecutive days.
- Reports must be submitted within 20 days of hire date (i.e., the date services are first performed for pay).
- This form may be photocopied as necessary. Many employers preprint employer information on the form and have the employee complete the necessary information during the hiring process.
- When reporting new hires with special exemptions, please use the MI-W4 form.
- Online and other electronic reporting options are available at: www.mi-newhire.com.

- Employers who report electronically and have employees working in two or more states may register as a multi-state employer and designate a single state to which new hire reports will be transmitted. Information regarding multi-state registration is available online at: http://www.acf.hhs.gov/programs/cse/newhire/employer/private/newhire.htm#multi or call (410) 277-9470.
- Reports will not be processed if mandatory information is missing. Such reports will be rejected and you must correct and resubmit them.
- For optimum accuracy, please print neatly in all capital letters and avoid contact with the edge of the box. See sample below.

A B	С	1	2	3
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EMPLOYEE Information (Mandatory)		Social Security Number:
First Name:		Middle Initial:
Last Name:		
Address:		
Address.		
City:		State:
Zip Code:		Hire Date:
OPTIONAL Date of Birth:	Driver's License No:	
EMPLOVED Information (Mandatory)		Federal Employer Identification Number (FEIN):
EMPLOYER Information (Mandatory)		
Employer Name:		
Employer Name:		
Employer Name:		State:
Employer Name: Address:		
Employer Name: Address: City:		
Employer Name: Address:		
Employer Name: Address: City:		
Employer Name: Address: City:		
Employer Name: Address: City: Zip Code:		
Employer Name: Address: City: Zip Code:	Conta	
Employer Name: Address: City: Zip Code: OPTIONAL Contact Name:	Conta	State:
Employer Name: Address: City: Zip Code: OPTIONAL Contact Name:	Conta	State:
Employer Name: Address: City: Zip Code: Contact Name: Contact Phone:	Conta	State:
Employer Name: Address: City: Zip Code: Contact Name: Contact Phone:	Conta	State:

Pef: Social Security Act section 453A and the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 (P.L. 104-193), effective October 1, 1997.

MI-W4

EMPLOYEE'S MICHIGAN WITHHOLDING EXEMPTION CERTIFICATE STATE OF MICHIGAN - DEPARTMENT OF TREASURY

This certificate is for Michigan income tax withholding purposes only. You must file a revised form within 10 days if your exemptions decrease or your residency status changes from nonresident to resident. Read instructions below before completing this form.

-		▶ 1. Social Security Number	2. Date of Birth		
ssued under P.A. 281 of 1967.			Z. Bate of Birth		
▶ 3. Type or Print Your First Name, Middle Initial and Last	Name	4. Driver's License Number or State II)		
Home Address (No., Street, P.O. Box or Rural Route)		▶ 5. Are you a new employee? Yes If Yes, enter date of hir	e		
City or Town	State ZIP Code	No			
6. Enter the number of personal and depende	ent exemptions you are clair	ming	▶ 6.		
7. Additional amount you want deducted from (if employer agrees)					
 8. I claim exemption from withholding because a. A Michigan income tax liability is b. Wages are exempt from withhold c. Permanent home (domicile) is lower 	not expected this year. ding. Explain:				
EMPLOYEE: If you fail or refuse to file this form, your employer must withhold Michigan income tax	Under penalty of perjury, I certify that the number of withholding exemptions claimed on this certificate does not exceed the number to which I am entitled. If claiming exemption from withholding, I certify that I anticipate that I will not incur a Michigan income tax liability for this year.				
from your wages without allowance for any exemptions. Keep a copy of this form for your records.	9. Employee's Signature	▶ Date			
INSTRUCTIONS TO EMPLOYER: Employers must report all new hires to the State of Michigan. Keep a copy of this certificate with your records. If the employee claims 10 or more personal and dependent exemptions or claims a status exempting the employee from withholding, you must file their original MI-W4 form with the Michigan Department of Treasury. Mail to: New Hire Operations Center, P.O. Box 85010; Lansing, MI 48908-5010.		and 11 before sending to the Michi one No. and Name of Contact Person ▶11. F	gan Department of Treasury. ederal Employer Identification Number		

INSTRUCTIONS TO EMPLOYEE

You must submit a Michigan withholding exemption certificate (form MI-W4) to your employer on or before the date that employment begins. If you fail or refuse to submit this certificate, your employer must withhold tax from your compensation without allowance for any exemptions. Your employer is required to notify the Michigan Department of Treasury if you have claimed 10 or more personal and dependent exemptions or claimed a status which exempts you from withholding.

You MUST file a new MI-W4 within 10 days if your residency status changes or if your exemptions decrease because: a) your spouse, for whom you have been claiming an exemption, is divorced or legally separated from you or claims his/her own exemption(s) on a separate certificate, or b) a dependent must be dropped for federal purposes.

Line 5: If you check "Yes," enter your date of hire (mo/day/year).

Line 6: Personal and dependent exemptions. The total number of exemptions you claim on the MI-W4 may not exceed the number of exemptions you are entitled to claim when you file your Michigan individual income tax return.

If you are married and you and your spouse are both employed, you both may not claim the same exemptions with each of your employers.

If you hold more than one job, you may not claim the same exemptions with more than one employer. If you claim the same exemptions at more than one job, your tax will be under withheld.

Line 7: You may designate additional withholding if you expect to owe more than the amount withheld.

Line 8: You may claim exemption from Michigan income tax withholding ONLY if you do not anticipate a Michigan income tax liability for the current year because all of the following exist: a) your employment is less than full time, b) your personal and dependent exemption allowance exceeds your annual compensation, c) you claimed exemption from federal withholding, d) you did not incur a Michigan income tax liability for the previous year. You may also claim exemption if your permanent home (domicile) is located in a Renaissance Zone, you are a non-resident spouse of military personnel stationed in Michigan, or you are a member of a Native American tribe that has a tax agreement with the State of Michigan and whose principal place of residence is within the designated agreement area. Members of flow-through entities may not claim exemption from nonresident flow-through withholding. For more information on Renaissance Zones call (517) 636-4486. Full-time students that do not satisfy all of the above requirements cannot claim exempt status.

Employee's Withholding Certificate

OMB No. 1545-0074

► Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. ► Give Form W-4 to your employer.

Department of the Treasu Internal Revenue Service		► Give Form W-4 to your employer. ► Your withholding is subject to review by the IRS.				<u> </u>	
Step 1:		irst name and middle initial	Last name		(b) So	cial security number	
Enter							
Personal Information	Addre	ess or town, state, and ZIP code			card? It credit for SSA at	your name match the on your social security f not, to ensure you get or your earnings, contact 800-772-1213 or go to	
	(-)	Circula and Manufact filling a common to be			www.ss	sa.gov.	
	(c)	Single or Married filing separately Married filing jointly or Qualifying widow(er)					
		Head of household (Check only if you're unman	ried and pay more than half the costs.	of keeping up a home for you	ırself and	d a qualifying individual.)	
		4 ONLY if they apply to you; otherwis m withholding, when to use the estimat			on ea	ach step, who can	
Step 2: Multiple Job	s	Complete this step if you (1) hold mor also works. The correct amount of wit					
or Spouse		Do only one of the following.					
Works		(a) Use the estimator at www.irs.gov/		= :			
		(b) Use the Multiple Jobs Worksheet of withholding; or	on page 3 and enter the resu	lt in Step 4(c) below fo	r roug	hly accurate	
		(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld ▶ □					
		TIP: To be accurate, submit a 2022 For income, including as an independent		, , , ,	ave se	lf-employment	
		-4(b) on Form W-4 for only ONE of the you complete Steps 3–4(b) on the Form			s. (You	r withholding will	
Step 3:		If your total income will be \$200,000 c	or less (\$400,000 or less if ma	arried filing jointly):			
Claim		Multiply the number of qualifying ch	ildren under age 17 by \$2,000	▶ <u>\$</u>			
Dependents	•	Multiply the number of other depe	ndents by \$500	\$			
		Add the amounts above and enter the	total here		3	\$	
Step 4 (optional): Other		(a) Other income (not from jobs). expect this year that won't have w This may include interest, dividence	ithholding, enter the amount	of other income here.	4(a)	\$	
Adjustments		(b) Deductions. If you expect to claim want to reduce your withholding, u the result here			4(b)	\$	
		(c) Extra withholding. Enter any addit	tional tax you want withheld e	each pay period	4(c)	\$	
Step 5:	Unde	er penalties of perjury, I declare that this certi	ficate, to the best of my knowled	dge and belief, is true, co	rrect, a	nd complete.	
Here	 	Employee's signature (This form is not valid unless you sign it.) Date					
	/ E	mployee's signature (This form is not v	alid unless you sign it.)	Dat	е		
Employers Only	Emp	oyer's name and address			Employe number	er identification (EIN)	