



### Certification of Working Outside the State of Illinois

Date \_\_\_\_\_

I, \_\_\_\_\_, declare that I am working outside the State of Illinois on a temporary (60 consecutive days or greater) or permanent basis.\*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print name

\_\_\_\_\_  
UIN

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Street address where work is performed

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
UI Department name

\_\_\_\_\_  
Authorized signer of UI Department

\_\_\_\_\_  
UI Dept campus address and mail code

\_\_\_\_\_  
Printed name of authorized signer

\_\_\_\_\_  
UI Department phone

**\*All forms must be emailed to [paying@uillinois.edu](mailto:paying@uillinois.edu). Please contact UPB if you require a change to state tax withholding and/or to avoid taxation from more than one state.**

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