August ____, 2011

From:
[redacted]

To:
DUANE READE
440 Ninth Avenue
New York, NY 10001
(212) 273-5700

NOTICE OF TERMINATION OF WITHHOLDINGS AGREEMENT

NOTICE TO THE AGENT IS NOTICE TO THE PRINCIPAL
NOTICE TO THE PRINCIPAL IS NOTICE TO THE AGENT
(Applicable to all Successors and Assigns)

This constructive notice is in regards to the private contract between [redacted] and DUANE READE:

As of today, August ___, 2011, [redacted] hereby notifies DUANE READE to cancel all withholdings of income or earnings, including: state and federal income taxes, social security, Medicare, state and federal unemployment tax, union dues, third-party payments of sick pay, supplemental unemployment compensation benefits, and any and all other withholdings.

If there is any confusion about this notice, please have your attorney refer to Part 31, Section 3402(p)-1 of the Code of Federal Regulations, paragraph b.

As your courtesy to help you comply with these federal regulations stated above, I am hereby instructing you to please attach this statement to Form W-4 which I have previously filed with your company.

I do not wish to have any withholding from my paycheck between August _____, 2011 and December 31, 2020. Please update your payroll records to reflect this change.

IN WITNESS WHEREOF I hereunto set my hand and seal on this ____th day of ___________, 2011 and hereby certify all the statements made above are true, correct and complete.

Date: _________________

____
[redacted]

Liability Release Statement:

I _____________________________, understand that termination or withdrawal of a W-4, Employee's Withholding Certificate, releases the employer from any obligation to make payroll withholdings. I understand that in doing so, the taxpayer is thus responsible for all taxes due and I release the employer from any tax liability associated with this employee.

I certify that the foregoing statement is correct and I release the employer from any withholding obligations or claims.

[redacted], Secured Party Creditor is willing to sign a release statement and issue [redacted] upon request by the Employer, to further assist in this matter.

_________________________________ ___________________
Signature Date

CERTIFICATE OF SERVICE

It is hereby certified, that on the date noted below, the undersigned third-party witness mailed to:

DUANE READE
440 Ninth Avenue
New York, NY 10001

Hereinafter, "Recipient," the documents and sundry papers pertaining to TERMINATION OF WITHHOLDINGS AGREEMENT and [redacted] as follows:

1. NOTICE OF TERMINATION OF WITHHOLDINGS AGREEMENT (two leaf), issued by [redacted] and dated ________, 2011; and
2. LIABILITY RELEASE STATEMENT (one leaf), issued by [redacted] and dated ________, 2011; and
3. CODE OF FEDERAL REGULATIONS (one leaf) regarding Termination of Withholdings; and
4. unsigned courtesy copy of this NOTARY'S CERTIFICATE OF SERVICE (one leaf)

by first-class mail envelope properly addressed to Recipient at the said address and depositing same at an official depository under the exclusive face and custody of the U.S. Postal Service within the State of NEW YORK.

_____________________________ ___________ (Seal)
Third-party Witness DATE

[redacted]