Automating Redaction - Sample PDF

by Thom Parker, WindJack Solutions, Inc. (www.windjack.com)
For www.acrobatusers.com

This sample contains four W4 tax form for new employees at the "My Widgets" company. Certain text on the forms needs to be redacted, or removed, before the forms can be distributed to other departments. Two different redactions need to be done for two different distributions.

Because redaction is a privileged operation the redaction code needs to be run from either a trusted automation script, or the Acrobat JavaScript Console. Click on the button below to copy the redaction code to the console window.

Redaction is a 3 step process, so the redaction script is divided into 3 parts. After copying the code to the console window. Select and execute Step1 and Step2 to perform basic setup. Then select code for one of the two options in Step3 and then run this code to perform the actual redaction.

** This Sample Requires Acrobat Professional 9 or later

WindJack
SOLUTIONS

Form **W-4**

Department of the Treasury
Internal Revenue Service

Employee's Withholding Allowance Certificate

▶ **Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.**

OMB No. 1545-0074

1 Type or print your first name and middle initial.	Last name	2 Your social security number
Gud	**Guy**	**234 : 45 : 6789**

Home address (number and street or rural route)	3 ☑ Single ☐ Married ☐ Married, but withhold at higher Single rate.
1234 Nice Pl.	**Note.** If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.

City or town, state, and ZIP code	
Singleton, Nebraska, 12345	☐

		5	**2**
5	Total number of allowances you are claiming (from line **H** above **or** from the applicable worksheet on page 2)		
6	Additional amount, if any, you want withheld from each paycheck	6	$ **49**
7	I claim exemption from withholding for 2008, and I certify that I meet **both** of the following conditions for exemption.		
	● Last year I had a right to a refund of **all** federal income tax withheld because I had **no** tax liability **and**		
	● This year I expect a refund of **all** federal income tax withheld because I expect to have **no** tax liability.		
	If you meet both conditions, write "Exempt" here . . . . ▶	7	**Exempt**

Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature
(Form is not valid
unless you sign it.) ▶

Date ▶

8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)	9 Office code (optional)	10 Employer identification number (EIN)
My Widgets, 666 Haed's Road, Chicago, Ill. 6366	**H254**	**33 : 123-123**

Form W-4

Department of the Treasury
Internal Revenue Service

Employee's Withholding Allowance Certificate

OMB No. 1545-0074

▶ **Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.**

1 Type or print your first name and middle initial.	Last name	2 Your social security number
Theo	**Turgai**	**555 55 5555**

Home address (number and street or rural route)

555 Comp Ln. Boston, Ma.

City or town, state, and ZIP code

3 ☐ Single ☑ Married ☐ Married, but withhold at higher Single rate.

Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.

☐

5 Total number of allowances you are claiming (from line **H** above **or** from the applicable worksheet on page 2)	**5**	**0**
6 Additional amount, if any, you want withheld from each paycheck	**6**	$ **0**

7 I claim exemption from withholding for 2008, and I certify that I meet **both** of the following conditions for exemption.

● Last year I had a right to a refund of **all** federal income tax withheld because I had **no** tax liability **and**

● This year I expect a refund of **all** federal income tax withheld because I expect to have **no** tax liability.

If you meet both conditions, write "Exempt" here ▶ | **7** |

Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature
(Form is not valid
unless you sign it.) ▶

Date ▶

8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)	9 Office code (optional)	10 Employer identification number (EIN)
My Widgets, 666 Haed's Road, Chicago, Ill. 6366	**H254**	**33 123-123**

Form **W-4**

Department of the Treasury
Internal Revenue Service

Employee's Withholding Allowance Certificate

▶ **Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.**

OMB No. 1545-0074

1 Type or print your first name and middle initial.	Last name	2 Your social security number
Berry Lak	**iigi**	**777 ! 77 ! 7777**

Home address (number and street or rural route)	3 ☑ Single ☐ Married ☐ Married, but withhold at higher Single rate.
42 Happy Pl	**Note.** If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.

City or town, state, and ZIP code	
Wialea, Hawii, 42042	☐

5	Total number of allowances you are claiming (from line **H** above **or** from the applicable worksheet on page 2)	**5**	**4**
6	Additional amount, if any, you want withheld from each paycheck	**6**	$ **1,000**
7	I claim exemption from withholding for 2008, and I certify that I meet **both** of the following conditions for exemption.		
	● Last year I had a right to a refund of **all** federal income tax withheld because I had **no** tax liability **and**		
	● This year I expect a refund of **all** federal income tax withheld because I expect to have **no** tax liability.		
	If you meet both conditions, write "Exempt" here . . . . ▶	**7**	

Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature
(Form is not valid
unless you sign it.) ▶

Date ▶

8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)	9 Office code (optional)	10 Employer identification number (EIN)
My Widgets, 666 Haed's Road, Chicago, Ill. 6366	**H254**	**33 ! 123-123**

Form **W-4**	**Employee's Withholding Allowance Certificate**	OMB No. 1545-0074
Department of the Treasury Internal Revenue Service	▶ **Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.**	

1 Type or print your first name and middle initial.	Last name	**2** Your social security number
Var E	**Bradguy**	**666 : 66 : 6666**

Home address (number and street or rural route)	**3** ☑ Single ☐ Married ☐ Married, but withhold at higher Single rate.
1313 Dedman Rd.	**Note.** If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.

City or town, state, and ZIP code	
Fishkill, NY, 13666	☐

5	Total number of allowances you are claiming (from line **H** above **or** from the applicable worksheet on page 2)	**5**	**1**
6	Additional amount, if any, you want withheld from each paycheck	**6**	$ **500**
7	I claim exemption from withholding for 2008, and I certify that I meet **both** of the following conditions for exemption.		
	● Last year I had a right to a refund of **all** federal income tax withheld because I had **no** tax liability **and**		
	● This year I expect a refund of **all** federal income tax withheld because I expect to have **no** tax liability.		
	If you meet both conditions, write "Exempt" here . . . . ▶	**7**	

Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature
(Form is not valid
unless you sign it.) ▶   Date ▶

8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)	**9** Office code (optional)	**10** Employer identification number (EIN)
My Widgets, 666 Haed's Road, Chicago, Ill. 6366	**H254**	**33 : 123-123**