

US SAVINGS BONDS – Payroll Savings Application

*Note: Sections 1-5 must be completed – then section 6-12 for first bond

(For further information see instructions on back of this form)

This form must be filled in **BLACK INK** for electronic imaging

1 Agency Number	2 Social Security Number	3 Employee Name	4 Type payroll (Check One)
			RG <input type="checkbox"/> CT <input type="checkbox"/> UM <input type="checkbox"/>
<p>This authorization will remain in effect until I advise you to change or cancel it.</p>			
5 Signature of Employee _____		Daytime Phone Number _____	Date _____

	CPB Use	6 Deduction Amount per pay	7 Indicate the action you wish to authorize	
BOND # 1	78		NEW <input type="checkbox"/>	CHANGE <input type="checkbox"/> CANCEL <input type="checkbox"/>
8 SELECT EITHER BOND SERIES EE OR SERIES I				
SERIES EE			SERIES I	
Purchase price equals 50% of face value			Purchase price equals face value	
9 Bond Denomination			9 Bond Denomination	
100 <input type="checkbox"/>	200 <input type="checkbox"/>	500 <input type="checkbox"/>	1000 <input type="checkbox"/>	50 <input type="checkbox"/> 75 <input type="checkbox"/> 100 <input type="checkbox"/> 200 <input type="checkbox"/> 500 <input type="checkbox"/> 1000 <input type="checkbox"/>
10 Owner's Name	First	Middle	Last	Owner's Social Security Number
11 Co-Owner's Name	First	Middle	Last	(You may have a co-owner or beneficiary, not both)
OR				
12 Beneficiary's Name	First	Middle	Last	(You may have a co-owner or beneficiary, not both)

*Note: If second bond is desired, then continue below.

	CPB Use	6 Deduction Amount per pay	7 Indicate the action you wish to authorize	
BOND # 2	79		NEW <input type="checkbox"/>	CHANGE <input type="checkbox"/> CANCEL <input type="checkbox"/>
8 SELECT EITHER BOND SERIES EE OR SERIES I				
SERIES EE			SERIES I	
Purchase price equals 50% of face value			Purchase price equals face value	
9 Bond Denomination			9 Bond Denomination	
100 <input type="checkbox"/>	200 <input type="checkbox"/>	500 <input type="checkbox"/>	1000 <input type="checkbox"/>	50 <input type="checkbox"/> 75 <input type="checkbox"/> 100 <input type="checkbox"/> 200 <input type="checkbox"/> 500 <input type="checkbox"/> 1000 <input type="checkbox"/>
10 Owner's Name	First	Middle	Last	Owner's Social Security Number
11 Co-Owner's Name	First	Middle	Last	(You may have a co-owner or beneficiary, not both)
OR				
12 Beneficiary's Name	First	Middle	Last	(You may have a co-owner or beneficiary, not both)

*Note: If third bond is desired, then continue below.

	CPB Use	6 Deduction Amount per pay	7 Indicate the action you wish to authorize	
BOND # 3	80		NEW <input type="checkbox"/>	CHANGE <input type="checkbox"/> CANCEL <input type="checkbox"/>
8 SELECT EITHER BOND SERIES EE OR SERIES I				
SERIES EE			SERIES I	
Purchase price equals 50% of face value			Purchase price equals face value	
9 Bond Denomination			9 Bond Denomination	
100 <input type="checkbox"/>	200 <input type="checkbox"/>	500 <input type="checkbox"/>	1000 <input type="checkbox"/>	50 <input type="checkbox"/> 75 <input type="checkbox"/> 100 <input type="checkbox"/> 200 <input type="checkbox"/> 500 <input type="checkbox"/> 1000 <input type="checkbox"/>
10 Owner's Name	First	Middle	Last	Owner's Social Security Number
11 Co-Owner's Name	First	Middle	Last	(You may have a co-owner or beneficiary, not both)
OR				
12 Beneficiary's Name	First	Middle	Last	(You may have a co-owner or beneficiary, not both)