

Savings Bond Purchase and Change Form

Privacy Notice: State law requires that you be informed that you are entitled to: (1) request to be informed about the information collected about yourself on this form (with a few exceptions as provided by law); (2) receive and review that information; and (3) have the information corrected at no charge. To request this information, contact payroll@tamug.edu or (979) 845-2711. For Galveston inquiries, contact payroll@tamug.edu or call (409) 740-4837.

INSTRUCTIONS An employee may participate in the savings bond payroll deduction program by completing this form. Please complete all fields in Section 1. If you check A, B, or C in Section 1, please complete Section 2 below. If you check A or D in Section 1; OR if you have multiple Bond allotments please complete Section 3 below. If you check E in Section 1 please explain in Section 4 below.

Note: The furnishing of a Social Security number for the owner or first named co-owner of a Bond is required by the regulations governing Savings Bonds, i.e., Department Circular PD Series 3-80 (31 CFR 353). The numbers are used to maintain ownership records of the Bonds. Other information requested by this form is also required under the above regulations to establish the rights, authority, and/or entitlement of the signers. Failure to furnish any of the requested information may prevent completion of the transaction. Married women should use their given names, e.g. "Mary L. Smith". If co-owner or beneficiary is designated, the inclusion of that individual's Social Security number is desirable but not required. The use of courtesy titles is optional.

Special Note: This is a **\$5,000 maximum** purchase in one calendar year. For more information, go the US Treasury Direct at http://www.treasurydirect.gov/indiv/research/indepth/ebonds/res_e_bonds.htm

Section 1

Employee Name		SSN	Date
Department	Location	Work Phone	
<input type="checkbox"/> (A) New Allotment <input type="checkbox"/> (B) Increase Allotment <input type="checkbox"/> (C) Change Denomination <input type="checkbox"/> (D) Change Inscription <input type="checkbox"/> (E) Other (Below)			

Section 2: Bond Denomination

Amount to be allocated to Savings Bonds each pay period:
Choose a Bond denomination (cost price): <input type="checkbox"/> \$100 (\$50) <input type="checkbox"/> \$200 (\$100) <input type="checkbox"/> \$500 (\$250) <input type="checkbox"/> \$1000 (\$500)

Section 3: Bond Inscription

Owner's Name		SSN	
Street Address	City or Town	State	Zip Code
Is there a Co-Owner or Beneficiary? Check one: <input type="checkbox"/> No <input type="checkbox"/> Yes, Co-Owner <input type="checkbox"/> Yes, Beneficiary			
Co-Owner or Beneficiary Name		SSN	

Section 4: Other Action (Explain)

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I hereby authorize the foregoing allotment from my pay for the purchase of U.S. Savings Bonds Series EE to be issued with the inscriptions shown on this form. This authorization is to remain in effect until canceled by me in writing or termination of my employment. **This authorization is to be effective on the first payroll period after the date below.**

Employee Signature

Date

TAMU—SUBMIT TO:
Payroll Services
General Services Complex, Suite 1201
MS 1261
payroll@tamug.edu
Fax (979) 845-4134

TAMUG —SUBMIT TO:
Payroll Services
Sea Aggie Center, Bldg 3026
Suite 800, Room 807
payroll@tamug.edu
Fax (409) 740-4573

NEED HELP?
College Station--payroll@tamug.edu
(979) 845-2711
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(409) 740-4837