

AUTHORIZATION FOR PURCHASE AND REQUEST FOR CHANGE  
UNITED STATES SERIES EE SAVINGS BONDS

DATE 01/03/97 **PRINT IN INK OR TYPE**

EMPLOYEE'S NAME (First Name) JOHN (Initial) L (Last Name) DOE SOC. SEC. OR EMP. PAYROLL NO. 111-11-1111

DEPARTMENT/AGENCY USHR BUREAU OR OFFICE LOCATION WDC (or your District:city, state)

A NEW ALLOTMENT  B INCREASE ALLOTMENT  C CHANGE DENOMINATION  D CHANGE INSCRIPTION  E OTHER ACTION  (Describe on reverse)

(If you checked A, B, or C above complete the following) AMOUNT TO BE ALLOTTED EACH PAY PERIOD \$ 100.00 BOND DENOMINATION (cost price) \$100 (\$50)  \$200 (\$100)  \$500 (\$250)  \$1000 (\$500)

**BOND INSCRIPTION (If you checked A or D above, complete the following)**

OWNER'S NAME (First Name) JANE (Middle Name or Initial) M (Last Name) DOE SOCIAL SECURITY NO. 999-99-9999

ADDRESS (Number and Street) 123 MAIN STREET (City or Town) ANYTOWN (State) XX (ZIP Code) 00000-0000

CO-OWNER BENEFICIARY (check one)  (First Name) JOHN (Middle Name or Initial) L (Last Name) DOE SOCIAL SECURITY NO. 111-11-1111

\*For allotment options, see your canvasser or payroll office.

**U.S. Savings Bonds offer:**

- Market-based interest with a guaranteed minimum rate.
- Exemption from state and local income tax.

- Federal tax exclusion if Bonds are used for post-secondary education. Restrictions apply.
- Complete safety against loss.

**E. OTHER ACTION (Explain)**

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.

I hereby authorize the foregoing allotment from my pay with the understanding that U.S. Savings Bonds will be issued as requested. This authorization is to remain in effect until canceled by me in writing or termination of my employment.

EFFECTIVE ON FIRST PAYROLL PERIOD AFTER

JANUARY 03, 1997

Employee's Signature (Must be same as shown on payroll)