

WINSLOW TOWNSHIP BOARD OF EDUCATION

PAYROLL DEPARTMENT

856-767-2850 ext. 7513

TO: All Employees
FROM: Payroll Department
DATE: June 1, 2009
RE: US Savings Bonds

I, _____, hereby apply for US Savings Bonds

PRINT YOUR NAME LEGIBLY

through payroll deduction. Denominations are as indicated below. **Please circle the denomination(s) and the amount(s) to be deducted semi-monthly for 2009-10.** Please return this form to the payroll Department by June 15, 2009.

If you currently have bonds withheld, and wish to continue for the 2009-10 school year **do not** return the form and the deductions will automatically continue for the upcoming year.

_____ **Please check here and sign below if you currently have bonds withheld, but would no longer like to have them for the next school year.**

If you currently have bonds deducted from your check and wish to make changes, please complete information below.

<u>Monthly Denomination</u>	<u>Semi-monthly Deduction</u>
\$100.00 Bond	\$25.00
\$200.00 Bond	\$50.00

Please Print Legibly

Owner's Name _____

Address _____

City, State & Zip Code _____

Social Security Number _____

Co-owner or Beneficiary Name _____

(CIRCLE ONE)

Co-owner or Beneficiary Social Security # _____

Signature _____ Date _____ Location/School _____