



## Health Savings Account (HSA) Payroll Deduction

What is this form for?

Your employer is offering you the option to contribute to your HSA account through payroll deduction. You may also choose to contribute to your account on your own and take the deduction on your income taxes to the extent appropriate under applicable law.

### Contributor Information:

Print Full Name: \_\_\_\_\_

Employee ID: \_\_\_\_\_

### Contribution Information:

I want the following monthly amount placed into my HSA by payroll deduction:

Pre-tax

Post-tax

\$ \_\_\_\_\_ mo.

I understand the eligibility requirements for the HSA deposit and state that I qualify to make the deposit. I understand that due to banking regulations, I will be unable to open or deposit money into an HSA if the address I provided during enrollment is a P.O. Box

Signature of Employee: \_\_\_\_\_

Date: \_\_\_\_\_

**Please return this form to Benefits – People & Culture**

10850 E. Woodmen Road, Falcon, CO 80831