

College Savings Iowa[®]

Payroll Deduction Instruction Form

- Before completing this form, contact your employer's payroll department to verify that you can participate.
- Complete this form to establish, change, or delete payroll deduction instructions on your existing College Savings Iowa accounts. You may also provide your payroll deduction instructions online at www.collegesavingsiowa.com.
- After we process this form, you will receive a confirmation statement, which you must sign and submit to your employer's payroll department. Your payroll deduction instructions will not take effect until your employer has accepted your signed confirmation. You can receive this confirmation immediately by accessing your account online.
- Print clearly, preferably in capital letters and black ink.

Forms can be downloaded from our website at www.collegesavingsiowa.com. Or you can call us toll-free to order any form—or get assistance in filling out this one—at **888-672-9116** on business days from 8 a.m. to 9 p.m., Eastern time. Return this form in the enclosed postage-paid envelope, or mail to: **Michael L. Fitzgerald, Treasurer of State, College Savings Iowa, P.O. Box 219219, Kansas City, MO 64121-9219**. For overnight delivery or registered mail, send to: **Michael L. Fitzgerald, Treasurer of State, College Savings Iowa, 920 Main Street, Suite 900, Kansas City, MO 64105-2017**.

1. Participant Information

Account Number

Last Four Digits of Social Security Number,
Individual Taxpayer ID Number, or EIN

Name of Participant (first, middle initial, last)

--

Daytime Telephone Number

--

Evening Telephone Number

2. Employer Information

Name of Employer

Mailing Address

City

State

Zip

Payroll Department Contact Name

--

Telephone Number

Extension (if any)

State Agency/Department Name (Employees of the State of Iowa only)

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Work Telephone Number (Employees of the State of Iowa only)

REMEMBER TO SIGN IN SECTION 4.



PAYROLL IOWA

3. Payroll Deduction Instructions

If your employer submits your payroll deductions by check or electronic bank transfer, your contributions will not be available for withdrawal for ten calendar days.

(Check one.) Start payroll deductions. Change amount. Stop payroll deductions. (Skip to **Section 4.**)*

Deduct \$. from my paycheck each pay period and allocate the amount among my College Savings Iowa accounts as indicated below.

Important: You must allocate a minimum of \$15 to **each account** per pay period. Please use an additional sheet if you have more than four accounts.

<input type="text"/>	\$ <input type="text"/> . <input type="text" value="00"/>
Account Number	Dollar Amount

Name of Beneficiary (first, middle initial, last)

<input type="text"/>	\$ <input type="text"/> . <input type="text" value="00"/>
Account Number	Dollar Amount

Name of Beneficiary (first, middle initial, last)

<input type="text"/>	\$ <input type="text"/> . <input type="text" value="00"/>
Account Number	Dollar Amount

Name of Beneficiary (first, middle initial, last)

<input type="text"/>	\$ <input type="text"/> . <input type="text" value="00"/>
Account Number	Dollar Amount

Name of Beneficiary (first, middle initial, last)

4. Signature—YOU MUST SIGN BELOW

I certify that I have received and read the College Savings Iowa 529 Plan Program Description and Privacy Policies and understand the rules and regulations governing College Savings Iowa.

➤ <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Signature of Participant	Date (month, day, year)

***Important:** When you stop payroll deductions, you must also contact your employer’s payroll department to have them stop deductions as well.

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