



# Payroll Deduction Form

## Important information about this form:

- Fill out this form to set up payroll deduction contributions to your Oregon College Savings Plan account, or to change existing payroll deduction contributions. To stop payroll deduction contributions, please contact your employer.
- Review the **Employee Checklist** (included with this form), and **Plan Disclosure Booklet**.
- Please submit a different form for each Oregon College Savings Plan account you want to make payroll deductions contributions to.
- Your Oregon College Savings Plan account must be open before you submit this form to your Employer and the Plan to start payroll deductions.
- Once completed you'll need to give a copy of this form to your Employer and mail the original to the Plan at the address indicated. It may take up to 10 business days from the receipt of this form before a payroll deduction can be accepted. Please keep an additional copy of this form for your records.
- Make sure you use black ink. Type or print clearly in capital letters.

## Need help?

Give us a call Monday – Friday  
from 6am – 5pm PT at  
**1-866-772-8464** or  
**1-844-888-2253 (TTY)**

## Mail the form to:

Oregon College Savings Plan  
P.O. Box 9651  
Providence, RI 02940-9651

## Overnight Mail:

Oregon College Savings Plan  
4400 Computer Drive  
Westborough, MA 01581

## 1 Oregon College Savings Plan account information

\_\_\_\_\_  
Name of Account Owner (First and last)

\_\_\_\_ \_ - \_\_\_\_ \_ - \_\_\_\_ \_  
Account Owner's Social Security or Taxpayer Identification Number

OS \_\_\_\_ \_  
Oregon College Savings Plan account number (for account numbers  
less than 11-digits, please use leading zeros)

## 2 Payroll deduction instructions

(Select one)

- Set up payroll deduction
- Changing existing payroll deduction instructions  
(This will replace any previous payroll deduction instructions for this account)

## 3 Employee information

The employee must be the Oregon College Savings Plan Account Owner or if the account is an UGMA/UTMA, the Custodian for the minor. You cannot contribute payroll deductions into an account owned by your spouse, or by anyone else.

\_\_\_\_\_  
Employee ID Number (For Employer use only)

\_\_\_\_\_  
Name of Employee (First and last)

\_\_\_\_\_  
Name of Employer

**Employer address**

\_\_\_\_\_  
Street address 1

\_\_\_\_\_  
Street address 2

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP Code

\_\_\_\_\_  
Employer contact name

\_\_\_\_\_  
Employer telephone number

\_\_\_\_\_  
Ext.

## 4 Contribution information

Your employer will deduct the amount indicated below and send to the Plan on your behalf. The contribution instructions you provide in this section apply to your payroll deduction contributions only – not to future contributions you may make to this account by check, automatic contribution plan or any method except payroll deduction.

For a full list of all the portfolio options, please go online to [www.OregonCollegeSavings.com](http://www.OregonCollegeSavings.com) or see the **Plan Disclosure Booklet** for important information about the investment options before making a decision.

There's a \$5 contribution minimum to each portfolio you select. Please clearly print the portfolio name, code and amount you'd like to contribute below. Reference the **Portfolio Options Appendix** at the end of this form for a list of all portfolio names and codes.

____ / ____ / ____	_____	\$ ____ , ____ . ____
<b>Code</b>	<b>Portfolio name</b>	<b>Amount</b> (per pay period)
____ / ____ / ____	_____	\$ ____ , ____ . ____
<b>Code</b>	<b>Portfolio name</b>	<b>Amount</b> (per pay period)
____ / ____ / ____	_____	\$ ____ , ____ . ____
<b>Code</b>	<b>Portfolio name</b>	<b>Amount</b> (per pay period)
____ / ____ / ____	_____	\$ ____ , ____ . ____
<b>Code</b>	<b>Portfolio name</b>	<b>Amount</b> (per pay period)
____ / ____ / ____	_____	\$ ____ , ____ . ____
<b>Code</b>	<b>Portfolio name</b>	<b>Amount</b> (per pay period)

____ / ____ / ____	\$ ____ , ____ . ____
<b>Effective date</b> (This is the date the employee wants the employer to begin his/her payroll deductions)	<b>Total contribution amount</b> (per pay period)

## 5 Sign the form

By signing below, I authorize my employer to process periodic deductions from my paycheck for contribution into my Oregon College Savings Plan Account(s).

- I acknowledge and agree that my remedy for any errors made in connection with these transactions is limited to simple reimbursement of the amount of the error.
- I authorize the Plan and its agents to make adjustments to my account to correct such error.
- I understand that my Oregon College Savings Plan account may not be credited with my payroll deduction until the funds are received from my employer and that the date on my payroll stub may not be the same date the deposit is credited to my account.
- This authorization will remain in effect until cancelled by me or by the Plan, or upon termination of my employment with my employer.

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Signature of Account Owner/Custodian

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Date (mm/dd/yyyy)

## Employee Checklist

Please read this checklist carefully before completing this form.

- ✓ Be sure to include your employee ID number on this form to help your employer identify your payroll record.
- ✓ Your payroll deduction form will be rejected in its entirety if:
  1. you do not provide an account number,
  2. your contribution total is not added correctly, or
  3. the contribution amount for any portfolio is less than \$5.
- ✓ Give a copy of this form to your Employer.
- ✓ **Mail this original form to the Plan at the address indicated.** It may take up to 10 days from the receipt of this form before a payroll deduction contribution can be accepted.
- ✓ You must contact your employer to stop payroll deductions.
- ✓ If you have questions, please contact Oregon College Savings Plan customer service.

## Employer Checklist

The following information has been developed to help you establish automatic payroll deduction for any employee. Please read it carefully before sending funds to the Plan on behalf of any employee via ACH (Automated Clearing House) funds.

- ✓ The employee must provide his/her Oregon College Savings Plan account number on this form in order to set up payroll deduction.
- ✓ Code the account type (i.e., deposit) as “Checking” and transmit the funds to Bank of New York Mellon (ABA Number 011001234).
- ✓ Enter the account number as 740705.
- ✓ If your Payroll System allows, please enter the Individual Name Field with the employee’s Oregon College Savings Plan account number + Last Name.
  - Example: employee Oregon College Savings Plan account number OS91234567890, Last name Jones = OS91234567890 Jones.
  - Use leading zeros for account numbers less than 13 digits.
- ✓ If your payroll system generates the Account Name field automatically and does not allow for manual update then we will accept the system generated full name.
- ✓ It may take up to 10 days from the receipt of this form by the Plan before a payroll deduction can be accepted.
- ✓ If you have questions, please contact Oregon College Savings Plan customer service.

**Appendix – Oregon College Savings Plan Portfolio Options**

For descriptions and details about all of these portfolio options, please go online to [www.OregonCollegeSavings.com](http://www.OregonCollegeSavings.com) or see the **Plan Disclosure Booklet** for important information including descriptions, details, and risks about the investment options before making a decision.

**College Enrollment Year**

**Static Portfolios**

Code	Portfolio Name	Code	Portfolio Name
ORC37	Enrollment Year 2037	ORCCO	Target Risk – Conservative
ORC36	Enrollment Year 2036	ORCMO	Target Risk – Moderate
ORC35	Enrollment Year 2035	ORCAG	Target Risk – Aggressive
ORC34	Enrollment Year 2034	ORCDU	Diversified U.S. Equity
ORC33	Enrollment Year 2033	ORCDI	Diversified International Equity
ORC32	Enrollment Year 2032	ORCDF	Diversified Fixed Income
ORC31	Enrollment Year 2031	ORCIN	Diversified Inflation Protection
ORC30	Enrollment Year 2030	ORCBI	Balanced Index
ORC29	Enrollment Year 2029	ORCSC	Social Choice Balanced
ORC28	Enrollment Year 2028	ORCSF	Short-Term Fixed Income Index
ORC27	Enrollment Year 2027	ORCUE	U.S. Equity Index
ORC26	Enrollment Year 2026	ORCIE	International Equity Index
ORC25	Enrollment Year 2025	ORCFI	Fixed Income Index
ORC24	Enrollment Year 2024	ORCXX	FDIC-Insured Option (replacement for Principle Plus Interest)
ORC23	Enrollment Year 2023		
ORC22	Enrollment Year 2022		
ORC21	Enrollment Year 2021		
ORC20	Enrollment Year 2020		
ORC19	Enrollment Year 2019		
ORC18	Enrollment Year 2018		
ORC17	Enrollment Year 2017		
ORC16	Enrollment Year 2016		
ORC15	Enrollment Year 2015		
ORC14	Enrollment Year 2014		
ORC13	Enrollment Year 2013		

The investment information on this page has been provided by Sellwood Consulting, the investment advisor for the Oregon College Savings Plan. Before you make a decision, review the Plan Disclosure Booklet to learn about the important details and risks of each investment option.