



STERLING HSA®

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Salary Redirection Agreement for Health Savings Account

I, _____, an employee of _____, authorize the payroll department to deduct \$ _____ from my paycheck and to direct the proceeds to Sterling HSA for investment into my Health Savings account.

Please begin this redirection for the payroll period beginning _____. This notice is in effect until further notice.

Employee Information:

Name: _____

Address: _____

City, State, Zip: _____

Social Security #: _____

Employee Signature

Date

Approved by

Date