# Automatic Payroll Deduction Form

HOMESTEAD FUNDS
*Created by NRECA*

Please use this form to tell your employer's payroll department how you would like your contributions deducted from your wages and invested in Homestead Funds. This form is intended to serve as a record for your employer's payroll department of changes to your elections. It does not need to be sent to Homestead Funds.

If you or your employer need assistance with this form, please call us toll-free between 8:30 a.m. and 5:00 p.m. ET at **1-800-258-3030** and say "representative" at the prompt.

Note to employers: You have several choices to submit funds—Direct ACH deposit, Fedwire or check. To learn more, please read the "Employer Instructions to Submit Funds" document at homesteadfunds.com. Click **Benefits Administrator Resources** at the top of the page, then **Employer Documents > Forms for Payroll > Employer Instructions to Submit Funds.**

**Check one:**

❑ New/change deduction ❑ Stop deduction (skip to signature)

| Fund Name | Account Number | Investment Allocation |
|---|---|---|
| Daily Income (168) | 168-_____ | $_____ |
| Short-Term Gov. (170) | 170-_____ | $_____ |
| Short-Term Bond (172) | 172-_____ | $_____ |
| Stock Index (174) | 174-_____ | $_____ |
| Value (176) | 176-_____ | $_____ |
| Small-Company (178) | 178-_____ | $_____ |
| International Value (180) | 180-_____ | $_____ |
| Growth (182) | 182-_____ | $_____ |
| | **Total** | $ 0.00 |

Beginning on _____/_____/_____, I hereby authorize my employer to deduct or stop deducting the amounts indicated from my wages each pay period and, if applicable, to deposit the same into the Homestead Funds Account(s) as indicated.

_____
Employee Name (Please Print)

▶ **X** _____ _____
Employee Signature Date

▶ **X** _____ _____
Employer Acknowledgement Date