



Office of the State Comptroller
PAYROLL BULLETIN

Subject 1992 Savings Bond Campaign and Revised AC-846 Savings Bond Authorization Form	Bulletin No. P-729
	Date April 23, 1992

A Savings Bond Campaign is currently being conducted and the literature, including the Revised AC-846 Savings Bond Authorization Form has been sent to all agencies.

REVISED SAVINGS BOND AUTHORIZATION FORM

The Revised Savings Bond Authorization Form is an 8-1/2 x 11 one part form, which provides for improved reporting of Bond Registration information. An employee enrolling in the program, cancelling or changing existing bond registration information must complete the top of the form (Social Security number, name, line number and agency code) and provide required additional information in the blocks provided.

NEW ENROLLMENT

The employee must check the "NEW" block, enter the biweekly deduction amount, select the bond denomination (\$100, \$200, \$500 or \$1,000) desired and complete the Bond Registration blocks. At least one registration must be entered. Employees may have up to 5 bond registrations, with bonds issued on a rotating basis.

If the bond is to be issued to the employee, the name and address in the Bond Owner fields must be identical to the name and address in OSC payroll files. (The name and address printed on the employee's check or direct deposit stub.) The employee's Social Security number must also be entered in the appropriate block.

If the employee chooses to have a co-owner or beneficiary, he or she must check the appropriate block (co-owner or beneficiary) and enter the name of the co-owner or beneficiary.

STATE OF NEW YORK - FORMS ORDER

-See Reverse for Instructions-

SEND TO:

Office of the State Comptroller
 Gov. Smith State Office Building
 Albany, New York 12236
 ATTENTION: Stock Control

Date of Request _____

AGENCY		
SHIP TO: (Agency Name, Address, Zip Code)	Dept. Div. Code	
ATTENTION OF: _____ (Print of Type Name)		
Authorized Signature	Title	Telephone Number

*****KEY ONLY DATA BELOW THIS LINE*****

DOCUMENT: STKRM
 FORMAT: MISREQ

TRANSACTION CODE 7 TRANSACTION DATE

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FORM IDENTIFICATION <small>(See Reverse)</small>	QUANTITY ORDERED <small>(Do not key)</small>	QUANTITY DISBURSED	DESCRIPTION <small>(Do not key)</small>																			
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