

## Health S avings Account Response Form

You have until	the date for filing	g your tax	return without	extensions	to
fund the HSA (g	enerally April	15th), howev	er you may	only use moni	es for
expenses incurre	ed after the HS	A is establishe	ed.		

regarding the opportunity to open a H	on SURYLGHG LQ WKH EHQ lealth Savings Account. I understand th Q PXVW EH SURcVorttr18utf100hsEHGIR	at + H D O W K					
P\SD\FKEZNŒGHSRVL <u>WHG</u>	Failuncevitobe the correct routing and	account					
number will prohibit P \ HPSOR\H	HU¶V DEL @rbdA/s\s WHRealth Savings	Account					
contributions to my HSA account.							
Bank Routing Number HSA Account Number							
Empl oyee Signature	Date						
		_					
Printed Name	ID #	_					
And rews University Email Address							

HR Office Use Only	
Received by Payroll	 MV/BB/WD