



Hamilton Community Schools

One Time HSA Deduction

Employee Information - PLEASE PRINT

Full Name:

Employee #:

Complete for HSA Deduction

Pay Date of Deduction:

Total Deduction Amount for This Pay Only:

*Form must be received by the payroll department no later than 10 business days prior to the pay date of deduction. Please email a scanned copy of your completed form to payroll@oaisd.org or interoffice to the payroll department. If you do not already participate in payroll deductions to a health savings account through Health Equity an account must be established before deductions can be processed. Please contact Betsy Moore at bmoore@hamiltonschools.us to create an account.

Acknowledgment

As a participant in the Hamilton Community Schools Cafeteria Plan and this HSA insurance option, I acknowledge the following statements to be true:

- Total calendar year HSA deductions will not exceed IRS limits.
- A current health savings account has already been established with Health Equity.
- This election is for a one-time contribution and will supersede any prior HSA deduction forms/amounts.
- Prior HSA deduction forms/amounts will resume after the one time deduction is completed.
- The above amount will be paid by payroll deduction through a section 125 plan.

Signature:

Date: