



Payroll Deduction Form Chicago Public School Employees

If you have not yet established a Bright Start Account for any account listed in Section 4, a Bright Start Account Application—Chicago Public Schools must be attached to this Form. If you need assistance completing this form, call 1-800-655-4853, Monday – Friday, 8:00 a.m. to 10:00 p.m. Central Time.

- New Payroll Deduction Employee
- Change Payroll Deduction Amount
- Change Allocation % (you must list all Accounts in Section 4 even if only one allocation is changing)
- Add an Account to the Allocation (you must list all Accounts in Section 4 even if only one allocation is being added)
- Stop Payroll Deduction (check this box and complete Section 1 and 5)

1. Account Information

| | |
|------------------------|--|
| Owner/Custodian's Name | Social Security Number |
| | <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

2. Employer Information (must be completed by Employee)

| | |
|-------------------------------|---|
| Employer Name | Employer ID |
| Chicago Public Schools | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

3. Payroll Deduction Amount Per Pay Period

\$, .00

4. Payroll Deduction Instructions

Investment Option Number(s) and Account Number(s) appear on confirmation and quarterly statements. If you are opening an Account at the same time you are submitting this Payroll Deduction Form, please complete Investment Option Name, Beneficiary's Name and Percent Allocation. Allocations must total 100%.

| If account is already established | | If account is not already established | | Percent Allocation |
|-----------------------------------|----------------|---------------------------------------|--------------------|--------------------|
| Investment Option Number | Account Number | Investment Option Name | Beneficiary's Name | |
| | | | | .00% |
| | | | | .00% |
| | | | | .00% |
| | | | | .00% |
| | | | | .00% |
| | | | | .00% |
| TOTAL ALLOCATION: | | | | 100.00% |

5. Signature

I hereby authorize my Employer (as indicated in Section 2 above) or its designee to establish, modify or cancel payroll deduction as indicated above and to remit such amounts to my Bright Start Account(s). I understand that amounts I contribute via payroll deduction will not reduce my taxable income. I understand that payroll deduction instructions will be processed as soon as administratively feasible and will continue, subject to my employer's deduction schedule, until I provide the Program Manager with an updated Payroll Deduction Form requesting to modify or cancel such instructions. I understand that neither OppenheimerFunds Inc. nor its affiliates, nor the State of Illinois or the State of Illinois Treasurer's Office is responsible for any losses resulting from my employer's failure to timely and accurately process my payroll deduction contributions. I understand that the Program has the right to initiate adjustments to my Account for any deposit made in error.

| | |
|---|------|
| Signature of Account Owner, parent or guardian (if the Account Owner is a minor) or custodian | Date |
| ▶ | |



ACCOUNT OWNER CHECKLIST

- If you are establishing a new account did you include a Chicago Public Schools Account Application?
- Does your percentage allocation total 100%?
- If you are adding an account or changing allocations did you list all accounts you own into which you want a portion of your payroll deduction deposited?
- Did you sign the form?

If the form is complete please mail to:

Bright Start College Savings Program
P.O. Box 6498
Chicago, IL 60680



Alexi Giannoulis

Illinois State Treasurer

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CPI# 5759