

NYCAPS AGENCIES ONLY

THE CITY OF NEW YORK
PAYROLL MANAGEMENT SYSTEM
IRA PAYROLL DEDUCTION ENROLLMENT

SUBMIT COMPLETED FORM TO:
Your Agency's Payroll Officer

www.NYC.gov/payroll

EMPLOYEE INSTRUCTIONS

INITIATE DEDUCTION: CHECK THE "INITIATE DEDUCTION" BOX, COMPLETE SECTION "A" (EMPLOYEE INFORMATION) AND SECTION "C" (EMPLOYEE AUTHORIZATION), HAVE BANK OR FINANCIAL INSTITUTION COMPLETE SECTION "B".

CANCEL DEDUCTION: CHECK THE "CANCEL DEDUCTION" BOX, COMPLETE SECTION "A" (EMPLOYEE INFORMATION) AND SECTION "C" (EMPLOYEE AUTHORIZATION).

BANK OR FINANCIAL INSTITUTION INSTRUCTIONS: COMPLETE SECTION "B" (BANK OR FINANCIAL INSTITUTION INFO)

EMPLOYEE & BANK AUTHORIZATION IS REQUIRED TO INITIATE A DEDUCTION

**IRA DEDUCTION
ACTION REQUESTED**

INITIATE DEDUCTION
(FOR NEW IRA ENROLLMENTS)

CANCEL DEDUCTION
(TO CANCEL IRA DEDUCTIONS PREVIOUSLY REQUESTED)

SECTION A			EMPLOYEE INFORMATION			EMPLOYEE REFERENCE NUMBER		
NAME LAST			FIRST			MI		
ADDRESS						APT / FL		
CITY			STATE			ZIP		

SECTION B				BANK OR FINANCIAL INSTITUTION INFORMATION				ANNUAL GOAL AMOUNT	
NAME						\$			
ADDRESS						FL / RM			
CITY			STATE			ZIP			
BANK ROUTING INFORMATION		TRANSIT / ABA NO.				IRA ACCOUNT NUMBER			

BANK OFFICER / FIRM REPRESENTATIVE INFORMATION

NAME			TELEPHONE NUMBER			EXT.NO.		
I CERTIFY THAT THE IRA ACCOUNT NOTED ABOVE IS VERIFIED AND TO THE ABOVE NAMED PERSON								
SIGNATURE			TITLE			DATE		
						MONTH / DAY / YEAR		

SECTION C			EMPLOYEE AUTHORIZATION					
I HEREBY REQUEST AND AUTHORIZE THE ABOVE IRA PAYROLL DEDUCTION AMOUNT TO BE SENT TO MY IRA ACCOUNT IN THE BANK OR CUSTODIAN ACCOUNT DESIGNATED HEREIN. I AUTHORIZE THAT, IF THROUGH AN ERROR, OVERPAYMENT IS CREDITED TO MY ACCOUNT, I AGREE THAT MY ACCOUNT MAY BE ADJUSTED BY A DEDUCTION OF THE OVERPAYMENT								
SIGNATURE			DATE			MONTH / DAY / YEAR		

SECTION D FOR CITY OF NEW YORK NYCAPS AGENCY USE ONLY

DEDUCTION AMOUNT			COPY FROM SECTION "B"			ANNUAL GOAL AMOUNT		
\$ [][][][] . [][]						\$ [][][][][][]		

TRANSACTION AUTHORIZATION		MANAGER/SUPERVISOR		I CERTIFY THAT THE ABOVE DATA WAS ENTERED	
DATA ENTERED BY		TELEPHONE NUMBER		NAME	
SIGNATURE		DATE		SIGNATURE	
				DATE	