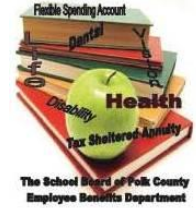




# STOP TSA PAYROLL DEDUCTION REQUEST FORM



DATE: \_\_\_\_\_

SAP #: \_\_\_\_\_

NAME: \_\_\_\_\_  
(Last) (First) (MI)

SOCIAL SECURITY #: \_\_\_\_\_

My policy is with: \_\_\_\_\_  
(Company Name)

I have a current payroll deduction in the amount of: \_\_\_\_\_

I hereby request that you stop further payroll deductions for this Tax Sheltered Annuity (TSA).

Please take the **Final** deduction from my \_\_\_\_\_ paycheck.  
(Last month you want deduction taken from)

I understand that it is my responsibility to notify my agent/company.

\_\_\_\_\_  
(Employee Signature)

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Return completed form via Courier Rt. E or  
US Mail (PCSB PO Box 391 Bartow, FL 33831)  
To the attention of: Risk Management