

## CANADA SAVINGS BONDS DEDUCTION STOP CHANGE FORM

**NOTE: This form can only be used to REDUCE or STOP your deduction. NEW ENROLMENTS OR INCREASES are only permitted during the annual October campaign.**

Please complete all information and send to the **PAYROLL DEPARTMENT**:

Date: \_\_\_\_\_

Name (first and last): \_\_\_\_\_  
(Please print)

Employee Payroll #: \_\_\_\_\_

Department: \_\_\_\_\_

Telephone # \_\_\_\_\_

This is to authorize the payroll department to:

**STOP my Canada Savings Bond Deduction:** \_\_\_\_\_

**DECREASE my Canada Savings Bond Deduction to:** \$ \_\_\_\_\_ /pay

**Signature:** \_\_\_\_\_

(Print form and Sign)

**EFFECTIVE DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(year/mm/dd)

**Please send this form to the PAYROLL DEPARTMENT.**  
**General information on (e.g. redeeming your Canada Savings Bonds**  
**can be found at the [CSB website](#).**