U.S. DEPARTMENT OF HOMELAND SECURITY U.S. Coast Guard CG-2060 (Rev. 02-10)

BOND WORKSHEET FOR SERIES "EE" AND SERIES "I" BONDS

| EMPLID | Name (Last, Fi | rst, MI.) | Permanent Unit | | | | | | | |
|--|--------------------|-----------|------------------------------|--------------------------------------|-------------------------------|--|--|--|--|--|
| PURPOSE : Use this form to start or stop a bond and to report a change of address to a bond. This worksheet serves as the supporting documentation for the SPO input process. | | | | | | | | | | |
| There are two types of bonds that members may have. Series "EE" bands are purchased at cost of half of the face value of the bond. Series "I" bonds are purchased at full face value of the bonds. | | | | | | | | | | |
| Purpose of request: Start Stop Change of Address | | | | | | | | | | |
| Start Amount: Month of First Deduction: | | Stop Ar | nount: of Last Deduction: | (Applies to Stops) Enter # from LES: | | | | | | |
| For payment dated: | | | | | | | | | | |
| Frequency and Face Value of Series I | Face Value Bond | of | Actual Monthly Deduction | You V | You Will Receive a Bond | | | | | |
| Bond (Check one): | □ \$5 | 0.00 | \$50.00 | every | month (Frequency: M) | | | | | |
| | | | □ \$25.00 | every | very 2 months (Frequency: B) | | | | | |
| | | | □ \$12.50 | every | every 4 months (Frequency: T) | | | | | |
| Annual Purchase Limit | □ \$7 | 5.00 | □ \$75.00 | every | month (Frequency: M) | | | | | |
| The annual limitation on purchases | | | □ \$37.50 | every 2 months (Frequency: B) | | | | | | |
| United States Savings Bonds is \$5,00 per Social Security Number. The lin | nit 51 | 00.00 | □ \$100.00 | every | every month (Frequency: M) | | | | | |
| applies separately to Series EE a Series I savings bonds, and separate | | | □ \$50.00 eve | | every 2 months (Frequency: B) | | | | | |
| to bonds issued in paper or electron form. An individual can buy a maximu of \$5,000 worth of electronic and pap bonds of each series in a sing calendar year, or a total of \$20,000, single ownership form. If paper bon are issued in co-ownership form, t limit applies to the first-named cowner. All limits are based on the iss | | | □ \$25.00 | every | 4 months (Frequency: T) | | | | | |
| | er \$2 | 00.00 | □ \$200.00 | every | every month (Frequency: M) | | | | | |
| | in | | □ \$100.00 | every 2 months (Frequency: B) | | | | | | |
| | he | | \$50.00 | every 4 months (Frequency: T) | | | | | | |
| | | 00.00 | □ \$500.00 | every month (Frequency: M) | | | | | | |
| price of the securities. | | | □ \$250.00 | every | ry 2 months (Frequency: B) | | | | | |
| The pay system does not automatica stop bond allotments based on annu | | | \$125.00 | every 4 months (Frequency: T) | | | | | | |
| purchase limits. The member mu submit a Stop Bond Allotme | st \$1 | 00.00 | □ \$1000.00 ever | | month (Frequency: M) | | | | | |
| request to stop the payroll deduc | | | □ \$500.00 | | 2 months (Frequency: B) | | | | | |
| | | | □ \$250.00 | every | 4 months (Frequency: T) | | | | | |

| Reverse of CG -2060 (Rev 02-109) |
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| Frequency and Face | | Face Value of | | l Monthly | | vill Receive a | | | | |
|--|----------------------------------|--|----------|-----------------------|---------|-------------------|--|--|--|--|
| Value of Series EE | | Bond | Deduc | ction | Bond | | | | | |
| Bond (Check one) | : | □ \$100.00 | | □ \$50.00 | every | month | | | | |
| | | | | □ \$25.00 | every | 2 months | | | | |
| | | | | \$12.50 | every | 4 months | | | | |
| | | \$200.00 | | \$100.00 | every | month | | | | |
| | | □ \$500.00 | | \$250.00 | every | month | | | | |
| | | | | \$125.00 | - | 2 months | | | | |
| | | | | \$62.50 | every | 4 months | | | | |
| | | \$1000.00 | | \$500.00 | every | month | | | | |
| Choose One | Name and | Name and Social Security Number of Owner of Bond | | | | | | | | |
| Co O | NI 1 | G | D | C' . : | | | | | | |
| Co-Owner | iname and | Social Security of Co-Owner | or Bene | пстагу | | | | | | |
| Beneficiary | | | | | | | | | | |
| Address Where Yo | u Want the | Bond Sent | | | | | | | | |
| Street/Rural Ro | | | | | | | | | | |
| Succe Rurai Ro | utc/1.0. Do. | Λ | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| City, State, 9-digit Zip Code | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | ~ | | | | | | | |
| In accordance::41. 5 | LICC andia | Privacy Act | | | 1 | 1 | | | | |
| information to the U. | | n $552a(e)(3)$, the following in | погтано | on is provided to you | wnen su | ppryring personar | | | | |
| imormation to the U. | s. Coast Gu | ard. | | | | | | | | |
| AUTHORITY: 37 U.S.C. 101 et seq; E.O. 9397, November 1943 (SSN). | | | | | | | | | | |
| PRINCIPAL PURPOSES: To permit starts, changes, or stops to bond allotments. To maintain a record of bond | | | | | | | | | | |
| allotments and ensure starts, changes, and stops are in keeping with member's desires. | | | | | | | | | | |
| ROUTINE USES: Information may be disclosed to Congress; allottees; Secret Service; General Accounting Office; | | | | | | | | | | |
| Federal, State, and local courts; U.S. Treasury; and to the Department of Justice in some cases for criminal prosecution, | | | | | | | | | | |
| civil litigation, or investigative purposes. | | | | | | | | | | |
| DISCLOSURE: Voluntary; however, failure to provide the requested information as well as the SSN may result in the | | | | | | | | | | |
| member not being able to start, change, or stop bond allotments. The furnishing of SSNs is required by the regulations | | | | | | | | | | |
| governing savings bonds, Department of Treasury Circular, Public Debt Series No. 3-80 (31 CFR 353). The numbers are | | | | | | | | | | |
| used to maintain ownership records of the bonds. Other information requested by this form is also required under the above | | | | | | | | | | |
| regulations to establish the rights, authority and/or entitlement of the signers. Failure to furnish any of the required | | | | | | | | | | |
| | | tion of the transaction. | ı | ~~ | NO 11 | 0.1 | | | | |
| Member's Signatu | Member's Signature: SPO Use Only | | | | | | | | | |
| | | | | Action Completed | | | | | | |
| | | | | Date: | | Initials: | | | | |