

H S A Contributions for 2017

Please return by Dec. 28, 2016

		ESC Contribution			
Name: _____		Coverage: Family _____			
Account # _____		Single _____			
Number of pays : 24 total					
Pay dates -- Optional front loading of H S A account		Employee Contribution			
		January 1, 2017 _____			
First quarter per pay	_____ X 6 _____				
Second quarter per pay	_____ X 6 _____				
Third quarter per pay	_____ X 6 _____	July 1, 2017 _____			
Fourth quarter per pay	_____ X 6 _____				
Total for 2017	_____	+	_____	=	_____

**2017
IRS Max
per year**
F \$ **6,750.00**
S \$ **3,400.00**

**Grand
Total**

Signature _____

Date _____