

**MN College Savings Plan  
Change Form**

EMPLOYEE'S AUTHORIZATION -- Please fill out and return to the Human Resources Office. This form is used to change the amount deposited into a MN College Savings Plan (529 plan) account.

**State Street Bank and Trust**

<u>Childs Name</u>	<u>Deposit Amount</u>

This authority will remain in effect until I have cancelled it in writing.

I authorize you and the financial institution listed above to initiate electronic credit entries (and, if necessary, debit entries and adjustments for any credit entries in error).

Name (Please Print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_