

## Health Savings Account Excess Contribution Removal Form



ACCOUNTHOLDER INFORMATIO	N								
Name:	Account Number(8 digits from Welcome Kit or Statement):								
Street Address:		City:				State:		Zip Code:	
Phone:			Social Security Number:						
Funds contributed in excess of your c by you prior to the due date, includin advisor in connection with your excess	g any exte	nsions, for	filing your Fed	-				_	
Note: The Internal Revenue Service re order for the withdrawal to be accura contributions refund by faxing or mai below. We will forward a check to yo	itely repor ling this si u for the a	ted, you maged gned and commount indi	ay not withdra ompleted form cated below, p	w the excess to HSA Bank lus any appli	directl k, using icable e	y. Instead, the addre earnings.	you must ss or fax n	request an excess	
EXCESS CONTRIBUTION INFORM		ution remo	oval fee will b	e deducted	i from	your acco	ount.		
		ear R	fund My Excess Contribution		ion?	Apply Excess Contribution to My Current Year's Contribution?			
			Yes	Yes No		Yes No		No	
Health Savings Account (HSA) contrib more information, please visit the U.S http://www.treasury.gov/resource-co	S. Departm	nent of the	Treasury webs	ite:		longer bas	ed on you	ır deductible. For	
YEARLY CONTRIBUTION MAXIM	UMS								
Coverage		2017 Contribution Maximum		2018 Contribution Maximum					
Single		\$3,400		\$3,450			0		
Family		\$6,750			\$6,900				
Catch-Up Contribution: Accounthold contribution of \$1,000. This is in addi  Health Savings accountholde  Age 55 or older (regardless of Not enrolled in Medicare (if	tion to the er of when du	maximums	s noted above. ar an accounth	older turns !	55)			·	
Authorized Signers who are 55 or contributions regarding excess contributions.	utions, ple	ase contact	our Client Ass	istance Cent	er at 80	00-357-624	16.		
By signing below, I hereby authoriz amount.	e a refund	or the exce	ess contributio	п ѕресітіей а	bove, p	oius any ea	rnings on	the requested	
Customer Signature						Da	te		

P.O. Box 939, Sheboygan, WI 53082-0939 605 N. 8<sup>th</sup> St., Ste. 320, Sheboygan, WI 53081-4525 Phone: 800-357-6246 | Fax: 877-851-7041

Website: <a href="mailto:www.hsabank.com">www.hsabank.com</a> | Email: <a href="mailto:askus@hsabank.com">askus@hsabank.com</a>