	DE	PARTMEN	T OF HOM			ITY					
			S. Coasi								
EMPLID	Name (Last, First, MI)				Perm	Permanent Unit					
PURPOSE: Use this f worksheet serves as the						change of	address	s to an	allotme	ent. Th	nis
Purpose of Request:	Stop Change										
Blanket Code (If known):					(App	(Applies to Stops & Changes)					
Start Amount: \$		Stop Amount: \$				Ente	Enter allotment # from				
Month of First Deduction:		Month of Last Deduction:				LES:	LES:				
ALLOTMENT TYPE: Enter type of allotment from table on reverse of this form.											
ELECTRONIC FUNDS TRANSFER (EFT) INFORMATION											
Type of Account Savings Checking											
Allottee Name (person/company who will receive allotment)											
Routing Transit and Check Digit Number (This 9-digit number can be obtained from the financial institution or found on the bottom of a check or deposit slip.)										n or	
Account Number (Do not enter loan number. Check with payee and make sure you're using the correct account number for EFT payments.)										f	
Account Title (Ac	count Holder's Nam	ne)		•							
Financial Institution											
VERIFICATION/AUTHORIZATION INFORMATION											
Member's Signature				Dat				e			
SPO Use Only											
Date Action Completed Initials of SPO YN											
Privacy Act Statement In accordance with 5 USC section 552a(e)(3), the following information is provided to you when supplying personal information to the U.S. Coast Guard: Authority - 37 USC Section 703. Principal Purpose(s) - Used to indicate the type of allotment member requested. Routine Use(s) - Updating Bond information.											

Disclosure - Disclosure is voluntary.

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DEFINITION: A financial institution is defined as a bank, credit union, savings and loan association, building and loan association, or brokerage/investment company.

RESTRICTIONS:

- Multiple allotments may not be made to the same payee unless each allotment has a unique account number.
- All allotments must be paid by direct deposit / electronic funds transfer (EFT).
- Maximum number of allotments is 14 (of 6 discretionary and 8 nondiscretionary).

TABLE OF RULES									
Allotment Code	Type of Allotment	Allotment Limitation	Required Carry into Period? Retirement?		Notes				
B (Nondiscretionary) Payable to a Treasury-Direct		One No		Yes	Treasury Direct replaced paper Savings Bonds www.treasurydirect.gov.				
	gs, Alottee Name: TREASURYDIF TreasuryDirect (no hyphens), Adu of Public Debt				-				
C (Nondiscretionary)	CFC	One	Yes	No	Will stop every December.				
D (Discretionary)	Support of Dependents	None	No	Yes	May not be started on self.				
H (Discretionary)	Home Loan Repayment Rent payment Set-A-Side Housing Program Public Private Venture (PPV) Housing	None	No	Yes Yes No No	PPV allotments are normally equal to the member's BAH rate.				
I (Discretionary)	Commercial Insurance	None	No	Yes	For payment of life, dental, health or vehicle insurance premiums for member and/or family.				
K (Nondiscretionary)	Additional MGIB	One	Yes	No	Increments of \$20. Total contribution not to exceed \$600. Must provide a stop date.				
L (Nondiscretionary)	Mutual Assist/Morale Credit Union/Bank Loan Armed Forces Relief Soc. American Red Cross	None None None None	Yes No Yes Yes	Yes No No No	Mutual Assistance Loan repayment allotments are only entered by CGMA Headquarters.				
M (Discretionary)	Navy Mutual Aid Insurance	One	No	Yes	Member and family only.				
O (Discretionary)	Other	None	No	No	Payment to any individual, vendor, or financial institution for any legal purpose not covered by other codes.				
S (Discretionary)	Savings/Checking Accounts	None	No	Yes	Not payable to finance companies. Electronic Funds Transfers only.				
T (Nondiscretionary)	Indebtedness	None	Yes	Yes	Example: Defaulted VA loans T allotments may only be started by PPC.				
X (Discretionary)	CG Association/CGMA Contribution	None	No	Yes	Blanket payee's only.				

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