

403(b) Salary Deferral and Participation Election Agreement

Reynolds School District
403(b) Plan

Participant Name		Social Security No.	
Address			
City		State	Zip
Date of Birth	Date of Employment	Email Address	
Evening Phone		Day Phone	
Position/Title	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	

PARTICIPATION ELECTIONS

Salary Deferral Elections

I hereby **apply for Participation** in the above-named 403(b) Plan and direct my employer to withhold through payroll reduction the following amount from each pay. I understand this election will be applied to future contributions only and will remain in effect until I submit a new signed Agreement.

\$ _____ (Amount deferred from each pay as a contribution to the 403(b) Plan)

I am **currently a Participant** in the above-named 403(b) Plan and direct my employer to withhold through payroll reduction the following amount from each pay.

\$ _____ (Amount deferred from each pay as a contribution to the 403(b) Plan)

Election to Defer Participation

I do not want to participate in the Plan at this time. I understand that I may change this election by completing a new Agreement Form prior to the next Plan Entry Date.

Election to Revoke Participation

Please discontinue my Salary Deferral Contributions to the Plan. I understand that I will be able to resume participation by completing a new Agreement Form prior to the next Plan Entry Date.

EMPLOYEE SIGNATURE

By signing this Agreement, Employee agrees to modify his/her salary as indicated above and Employer agrees to contribute this amount on Employee's behalf into the 403(b) annuity or custodial account(s) selected by Employee. Employee understands and agrees:

- In conjunction with his/her Employer, he/she is responsible for determining that his/her salary reduction amount does not exceed the limits of the Applicable Law;
- Is responsible for the accuracy of information provided by Employee, which is used in determining Employee's maximum annual contribution limit;
- Employer has no liability for any losses suffered by Employee that result from his/her participation in the 403(b) plan;
- Acknowledges that Employer has made no representation to Employee regarding the advisability, appropriateness or tax consequences of the purchase of the 403(b) plan;
- This agreement supersedes all prior 403(b) salary reduction and/or deduction agreements and shall automatically terminate if employment with Employer is terminated.

Participant Signature: _____ Date: _____