

Elective Deferral and Vendor Election Form

Plan Name:	George Patton School District 403(b) Plan	Ref. No.	105679
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Ref. No. 105679

- ☐ **To Enroll:** Complete All Sections
- ☐ **To Change Contribution Amount:** Complete Sections A, B and D
- ☐ **To Change Vendors:** Complete Sections A, C and D
- ☐ **To Change Contract/Account Number:** Complete All Sections

Section A Your Info	Please type or print clearly																		
	Last Name			First Name		M. I.		Social Security Number (SSN)											
Email Address: _____										Daytime Phone Number: (____) _____									

☐ **Salary Deferral** – I instruct my employer to deduct \$ _____ of my pay on a pre-tax basis each pay period for investment with the specified vendors below.
(In the space provided, enter a dollar amount.)

Please indicate how you are making your election ☐ as a dollar amount

I direct that all future contributions be invested with the following vendor(s). Enter a dollar amount.
If you have not established the account/contract, you cannot select the new vendor at this time.

Vendor Name	Amount	Account/Contract Number
AXA Equitable		
ING Reliastar		
Total Dollar Amount		

Section D
Sign

By signing this form, I have authorized the Employer to deduct the amount(s) elected from my paycheck and transmit the contributions to the vendors as indicated. I certify that I have established a 403(b) account with the vendors selected above.

Participant

Date