Murphy School District, AZ Participation Agreement for Internal Revenu Section 457(b) Deferred Compensation Prog	Name of Company - 457(b) Product Provider		
Employee Name	Social Sect	urity Number	
Work Location	Position	Position	
Original Agreement			
With respect to services rendered by the Employee compensation for such services shall be reduced by	hereafter, the Employer ar	nd the Employee hereby agree the	e Employee's
Equal amounts of \$		the, 20	pay period.
Amendment Agreement - Type of Ch	nange Desired		
Increase from \$ per pay peri	od to \$ b	eginning the, 20	pay period.
Decrease from \$ per pay per	riod to \$	beginning the, 20_	pay period.
SuspendNAME OF COMPA	ANY	_ Effective Date of Suspension _	, 20
The undersigned hereby agrees to the terms and conditions of the Murphy School District, AZ Deferred Compensation Plan ("Plan") as such Plan now exists or is hereinafter amended and a copy of the Plan has been made available to them. This election shall continue until the undersigned makes a subsequent election as provided by the Plan. The employer hereby authorizes on the provider company to issue an annuity contract or custodial arrangement for the benefit of the participant without the signature of the employer provided that the owner of the annuity contract or custodial arrangement is designated as thee employer's 457 Deferred Compensation Plan. I (the Employee) understand and agree to the following: My deferrals cannot begin sooner than the month following Participation Agreement approval. My accumulated deferrals will be held in trust by the Sample School District, State for the exclusive benefit of participants and their beneficiaries until paid to me under the rules of the Plan. I realize I may not assign or transfer my rights under the Plan. I am responsible for the accuracy of the excludable amounts stated in the Agreement. any overstatement of the amounts excludable as a salary reduction in the agreement, or any other violation of the requirement of IRS Code Section 457 could result in additional taxes, interest, and penalties to the Employee. I hereby authorize my Employer to reduce or suspend any deferrals established by thei agreement, if in its opinion, the total annual deferral would exceed the maximum allowable limit in any calendar year. Should my deferral exceed the maximum limit, I authorize my Employer to disallow deferral of the excess and direct these amounts to be refunded to me. Release of Liability - The Employee agrees that the Employer and its agents shall have no liability whatsoever for any and all losses suffered by me with regard to my selection of the annuity an/or custodial account, its terms, the selection of the insurance company, custodian, or regulated company, or my s			
Effective Date of this Agreement	, 20	Murphy School District,	AZ
AGENT REPRESENTATIVE			
	Ву:	EMPLOYER REPRESE	
EMPLOYEE		EMPLOYER REPRESE	NTATIVE
DATED, 20	DA	TED	, 20