Florida Southwestern State College, FL		Name of Company - 403(b) Product Provider	
Salary Reduction Authorization for 403(b) Annuity Contract or 403(b)(7) Custodial Account		Name of Company - 403(b) Froduct Frovider	
Employee Name	Employee I	Employee ID	
Work Location	Position	Position	
Original Agreement	1		
With respect to services rendered by the Employee hereafter compensation for such services shall be reduced by the following p	the Emp	ployer and the Employee hereby agree the Employee's	
Amounts equal to% of compensation per pay	ay period beginning the, 20 pay period.		
The amount elected above shall result in a total ANNUAL REDUCTION Employer agrees that it will remit the amount of such reduction for the Company listed above.	N not to exce 403(b) Tax S	eed the maximum allowable contribution calculation. The Sheltered Annuity or 403(b)(7) custodial account offered by the	
Amendment Agreement - Type of Change Desired			
Change to% of compensation per pay period	od beginning	ng the, 20pay period.	
Suspend-Name of Company	Eff	ffective Date of Change or Suspension, 20	
I have read the above and understand the proposed change. I hereb decrease or elimination of reduction under the 403(b) T.S.A. program falls within the guidelines established by the Internal Revenue Code of	y request the that this re 1986, as an	that such change be effected. I realize that if the change results in reduction or elimination cannot be "made up" in the future unless it mended.	
This Agreement shall be legally binding and irrevocable with respect to Agreement shall be effective only with respect to amounts not yet earned at the Employee's statutory limits under Section 402(g) or the limitation of Seduction to all Companies to which salary reduction contributions can be Company listed above, provided that the Employee has sufficient earning reduction. In the event that the calculations provided by the Employer a Employer's calculation shall prevail.	be made. It	It is understood that the amount specified will be forwarded to the	
I hereby authorize my Employer to reduce or suspend any contributions est exceed my Maximum Allowable Contribution in any calendar year.	tablished by	y this agreement, if in its opinion, the total annual contributions woul	
Release of Liability - The Employee agrees that the Employer and its age regard to my selection of the annuity and/or custodial account, its terms, the selection and purchase of shares of regulated investment companies.	ents shall have ne selection	ave no liability whatsoever for any and all losses suffered by me wit n of the insurance company, custodian, or regulated company, or m	
The Employee is responsible for the accuracy of the excludable amounts salary reduction in this agreement, or any other violation of the requirement Employee.	stated in th t of Section 4	this Agreement. Any overstatement of the amounts excludable as 403(b) could result in additional taxes, interests, and penalties to the	
It is the intent of the parties that the non-forfeitable retirement deferred ann Income Tax benefits provided for in Section 403(b) of the Internal Revenue	uity or custoo Code.	odial contract pursuant to this Agreement shall qualify for the Federa	
Any change to this Agreement must be in writing to the Employer and Employer.	becomes ef	effective upon the execution of this Agreement by Employee an	
This Agreement may be terminated by either the Employer or Employee up applicable.	oon thirty (30	30) days notice to the Company and to the Employer or Employee a	
Effective Date of this Agreement, 20		Florida Southwestern State College, FL	
AGENT/REPRESENTATIVE NAME		AGENT/REPRESENTATIVE PHONE	
EMPLOYEE SIGNATURE	Ву:	EMPLOYER SIGNATURE	

DATED _

Copyright © 2023 - TSA Consulting Group, Inc.

DATED