## Taylor County School District 403(b)/403(b)(7) Product Disclosure

prepared for

(employee)

This disclosure statement must be completed by the provider and a copy given to the employee each time the employee executes a new salary reduction agreement (SRA) with the Taylor County School District. A signed copy of this disclosure must accompany each original salary reduction agreement when submitted to the Finance Department. (

Not required	for an	nendments	to	original	SRA)
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I. Administration Data:					
A. Insurance Company or Mutual Fund: Administrator or Custodian: Company Address:	B. Local Agent / Registered Representative:				
Company Telephone:	Local Telephone:				
II. Product Type (please check one)    Interest Annuity Current rate% Guaranteed rate%   Equity Index Annuity Variable Annuity   Wariable Annuity Mutual Fund	IV. For Equity Index Annuities Only: Index Utilized:				
III. Fees or Charges associated with the Contract or Fund (complete applicable sections only )   Annual Fee: \$ or% of	V. Surrender Charges or Contingent Deferred Sales Charge (if applicable)   Declining –% beginning year one and reducing to 0% in year   Rolling –% from the date of each contribution for years. Other –   VI. Loan Provisions:   Are participant loans available from this account ? YES □ NO □   If yes, how many times per year?   Minimum loan available: \$   Current Loan Interest Rate%   If variable, loan interest is based on				
VII. Replacement Vendor Information:	Employee's Initials				
-	atisfaction by the undersigned representative, in addition to				

all required product information documents in connection with this account.

	 Employee	
Date:		

Date:

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Representative