Forest City Regional School District, PA Salary Reduction Authorization for 403(b)

Name of Company	
No Load Account (No agent signature Required)	

Salary Reduction Authorization for 405(b)	
Annuity Contract or 403(b)(7) Custodial Accour	No Load Account (No agent signature Required)
Employee's Name	Social Security Number
Work Location	Position
Original Agreement	
With respect to services rendered by the Employee hereafter, compensation for such services shall be reduced by:	the Employer and the Employee hereby agree the Employee's
Equal amounts of \$ per	pay period beginning the, 20 pay period.
The amount elected above shall result in a total ANNUAL REDUCTIO Employer agrees that it will remit the amount of such reduction for the by the Company listed above.	
Amendment Agreement - Type of Change Desired	
Increase from \$ per pay period to \$	beginning the, 20 pay period.
Decrease from \$ per pay period to \$	beginning the, 20 pay period.
Suspend—Name of Company	
Effective Date of Change	, 20
I have read the above and understand the proposed change. I herel results in decrease or elimination of reduction under the <u>403(b) T.S.A.</u> future unless it falls within the allowable limits for that year.	by request that such change be effected. I realize that if the change
This Agreement shall be legally binding and irrevocable with respect to am Agreement shall be effective only with respect to amounts not yet earned exceed the Employee's statutory limits under Section 402(g) or the limitation salary reduction to all Companies to which salary reduction contributions cathe Company listed above, provided that the Employee has sufficient ear requested reduction. In the event that the calculations provided by the District District's calculation shall prevail.	at the time of said termination. It is provided that this reduction does not a of Section 415 of the Internal Revenue Code. This limits the total allowable an be made. It is understood that the amount specified will be forwarded to rnings during the immediately preceding pay period to accommodate the
I hereby authorize my Employer to reduce or suspend any contributions es would exceed my Maximum Allowable Contribution in any calendar year.	stablished by this agreement, if in its opinion, the total annual contributions
The Employee is responsible for the accuracy of the excludable amounts st salary reduction in this agreement, or any other violation of the requirement the Employee.	
It is the intent of the parties that the non-forfeitable retirement deferred an Federal Income Tax benefits provided for in Section 403(b) of the Internal Robe in writing to the Employer and becomes effective upon the execution	evenue Code of 1954, as amended. Any change to this Agreement must
This Agreement may be terminated by either the Employer or Employee upo as applicable.	on thirty (30) days notice to the Company and to the Employer or Employee
I am aware that if I select Vanguard Funds as my investment provider, p prorated 'per payroll' basis. This annual fee is \$24.00 and may be changed i	
Effective Date of this Agreement,	20
AGENT / REPRESENTATIVE NAME AGENT/REPRESENTATIVE PHONE NUMBER	Forest City Regional School District, PA
EMPLOYEE	EMPLOYER

Dated ______ , 20 _____

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Dated _

_____, , 20 _____