

# COMPANY NAME

## Pension Plan Contribution Election Sheet

### EMPLOYEE INFORMATION

EMPLOYEE FULL NAME

EMPLOYEE ID / PAYROLL ID

DEPARTMENT / DIVISION

DATE OF BIRTH

DATE OF HIRE

SOCIAL SECURITY NUMBER (LAST 4 DIGITS)

### CONTRIBUTION ELECTION

**Pre-Tax Contribution:** I elect to contribute % or \$ per pay period.

**Roth (Post-Tax) Contribution:** I elect to contribute % or \$ per pay period.

**Catch-Up Contribution (Age 50 or older):** I elect to contribute an additional % or \$ per pay period.

**Decline / Stop Contribution:** I elect not to participate or to stop all active contributions at this time.

### INVESTMENT ALLOCATION

Please specify how your contributions should be allocated among the available funds. The total must equal 100%.

Fund Name / Investment Option	Allocation Percentage
	%
	%
	%
	%
<b>Total</b>	<b>100%</b>

### AUTHORIZATION & SIGNATURE

I hereby authorize my employer to make the payroll deductions selected above from my compensation each pay period and remit such contributions to the Plan Administrator. I understand that this election will remain in effect until I submit a new election form or terminate employment. I acknowledge that it is my responsibility to monitor my annual contribution limits.

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EMPLOYEE SIGNATURE

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DATE

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PAYROLL / HR REPRESENTATIVE SIGNATURE

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DATE RECEIVED