

RETIREMENT SAVINGS

Payroll Deduction Authorization Form

COMPANY INFORMATION

Company Name _____

Division/Department _____

EMPLOYEE INFORMATION

Employee Full Name _____

Employee ID Number _____

Social Security Number (Last 4 digits) _____

Email Address _____

CONTRIBUTION ELECTION

Select the type of retirement account and specify the contribution amount to be deducted from your gross pay each pay period.

Plan Type:

Pre-Tax 401(k)

Roth 401(k)

Traditional IRA

Roth IRA

Deduction Amount (Choose One):

Percentage of Pay: _____ %

Fixed Dollar Amount: \$ _____ per pay period

AUTHORIZATION & SIGNATURE

I hereby authorize my employer to deduct the amount indicated above from my salary each pay period and deposit it into my designated retirement account. This authorization will remain in effect until I submit a written change or termination request.

Employee Signature _____

Date _____

FOR EMPLOYER / PAYROLL ADMINISTRATION USE ONLY

Date Received

Effective Payroll Date

Processed By (Name)		Signature	
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