## SALARY REDUCTION AGREEMENT

Return to your employer when completed.

## **EXECUTION CLAUSE**

## PARTICIPANT INFORMATION \_\_\_\_\_ Account #: \_\_\_\_\_ Name: \_\_\_ Employer Name: \_\_\_\_\_\_ City: \_\_\_\_\_\_ State: \_\_\_\_\_ Have you made contributions to another 401(k) or 403(b) account this year? ☐ Yes ☐ No If so, how much? PARTICIPANT ELECTION I, undersigned participant, hereby elect to (participant can choose one or both of deferral options): Pre-tax contributions Defer from my salary on a pre-tax basis: ■ 3% of compensation □ 5% of compensation ☐ \_\_\_\_\_ (percentage or dollar amount) per paycheck Roth contributions (after-tax) Defer from my salary as a Roth contribution: ■ 3% of compensation ■ 5% of compensation (percentage or dollar amount) per paycheck COMMENCEMENT DATE Date: \_\_\_\_\_ (The date you want your deferral to start.) PARTICIPANT SIGNATURE Participant and Employer hereby mutually and irrevocably agree that Employer shall reduce and withhold from the Participant's cash remuneration earned after the Salary Reduction Commencement Date and prior to the Salary Reduction Termination Date the Salary Reduction Amount designated above. The Employer shall contribute the amount so withheld to the Free Will Baptist Pension Plan. This Salary Reduction Agreement may be terminated at any time at the option of the participant. Termination of this Salary Reduction Agreement shall be accomplished by informing employer (preferably in writing) or separation from service from this Employer. Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_ **EMPLOYER SIGNATURE**

## Richland Ave Financial REPRESENTATIVE SIGNATURE

The Trustees of the Free Will Baptist Pension Plan hereby agree to accept the Salary Reduction contributions attributable to the Participant pursuant to the terms of this Salary Reduction Agreement and of the Plan.

Employer Signature: \_\_\_\_\_ Date:

Richland Ave Financial Signature: \_\_\_\_\_\_

