SALARY REDUCTION AGREEMENT

Return to your employer when completed.

EXECUTION CLAUSE

PARTICIPANT INFORMATION

Name:	SS#:	Account #:
Employer Name:	City:	State:
Have you made contributions to another 401(k) of	or 403(b) account this year? \square Yes \square No	If so, how much?
PARTICIPANT ELECTION		
I, undersigned participant, hereby elect to (partic	ipant can choose one or both of deferral o	ptions):
Pre-tax contributions Defer from my salary on a pre-tax basis: 3% of compensation 5% of compensation (percentage or dollar amount)	ınt) per paycheck	
Roth contributions (after-tax) Defer from my salary as a Roth contribution: 3% of compensation 5% of compensation (percentage or dollar amounts)	ınt) per paycheck	
COMMENCEMENT DATE		
Date: (The date you want your o	deferral to start.)	
PARTICIPANT SIGNATURE		
Participant and Employer hereby mutually and irre cash remuneration earned after the Salary Reduction Amount designated a Will Baptist Pension Plan. This Salary Reduction Termination of this Salary Reduction Agreement separation from service from this Employer.	ction Commencement Date and prior to the bove. The Employer shall contribute the Agreement may be terminated at any time	he Salary Reduction Termination amount so withheld to the Free e at the option of the participant.
Participant Signature:		Date:
EMPLOYER SIGNATURE		
Employer Signature:		Date:
BOARD OF RETIREMENT REPRESENTATIVE	E SIGNATURE	
The Trustees of the Free Will Baptist Pension Pla the Participant pursuant to the terms of this Sala		tion contributions attributable to

Board of Retirement Signature: _____ Date: ____

