

TDSP

TAX DEFERRED SAVINGS PROGRAM 457(b)



The University of Georgia

**Human Resources
Tax Deferred Savings Program**

**Salary Reduction Agreement
Company Distribution
Cancellation
457(b) Plan**

I wish to (check one):

- Start a new 457(b)
- Make a change to my existing 457(b)
- Cancel my 457(b)

Employee name Last	First	M I

Social Security Number

Email address

Pay Type:

- Monthly (12 months)
- Academic (10 months)
- Salaried (24 biweekly)
- Hourly (24 biweekly)

Campus phone Home phone

By my signature below, I agree that my **monthly** compensation shall be reduced by \$_____. (Please note that bi-weekly employees will have two deductions per month. Enter the monthly amount in the blank.)

Amount per pay period (per paycheck)	to	Company
_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____

The first reduction will be made ; or the pay period ending the month following receipt of this agreement by the employer. This agreement shall remain in full force and effect during the continued employment of said employee except as it may be amended or terminated in writing.

I understand the College of Coastal Georgia (CCGA) has not approved or disapproved any tax deferred savings program or any company writing such plan. It is the announced policy of CCGA not to permit incidental life insurance benefits as a part of the tax deferred savings program. The determination of the maximum yearly contribution(s) to such plan or plans is my responsibility and not that of my employer, the College of Coastal Georgia. The function of CCGA is to assist in securing the annuity of my choice (which includes no life insurance), make the salary reduction authorized by me and to remit monthly premiums to the insurance company. CCGA may also place limits on the amount of my annual reduction.

All tax deferred savings program forms must be received in Employee Benefits by the last working day of the month prior to the month they are to become effective.

Employee's Signature _____ Date _____

OFFICE USE ONLY

INITIAL

Coded _____ Checked _____

Entered _____ Rechecked _____