Long Falls Paperboard Retirement Plan #250178

401 K – Vanguard / Ascensus

**Pre-tax Deferral Election Form**

This form may be used to begin making elective deferrals (or to change or revoke previous elections), to enroll/not enroll in yearly automatic increases, and agree to default investments.

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| Participant Information | Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_ |
| Contribution Election | Deferral Election  Select one of the following:   * I elect to defer \_\_\_\_\_\_\_% of my compensation per pay period. * I wish to change my deferral to \_\_\_\_\_\_\_% of my compensation per pay period. |
| Yearly Automatic Increases | Yearly Automatic Deferral Increases  Select one of the following:   * I wish to enroll in automatic deferral increases of 1% per year to a maximum of 10%. This will occur on the first day of each year. * I do not wish to enroll in automatic deferral increases. |
| Default Investment | * I understand my amounts contributed will be invested in the default investment based on my birth year. I can contact Vanguard / Ascensus to make any changes. |
| Authorization | I certify that I have read, understand, and agree with the information in the instructions to this form. I hereby authorize the payroll deduction as specified above.  Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_ |