

Personal Information	Name Social Security #					
	Last	First	MI	Existing accounts ne	ed last 4 digits only	
	Address		City	State	Zip	
	Birth Date	Phone (work)	Phone (home)	Phone (cell)		
Account Status	Image: New account (Must open 457/401 accounts with RIC provider) Image: Change to existing account (This form replaces last completed deduction requested)					
457 Payroll Deduction Election	The combined amount of all 457 pretax and Roth contributions in a tax year is limited to the IRS annually declared maximum contribution limits (see https://das.iowa.gov/RIC/PSE/contributions).					
	Provider	Empower				
	Per	Pretax \$				
	paycheck amount & taxation	Roth \$				
		Stop deductions				
	Effective date: Changes are effective for the next available paycheck unless a future effective date is indicated.					
		Begin as of				
	Future effective date (if desired)					
		Final check				
Participant Signature	I authorize my employer to process these requests. I have access and agree to the terms and conditions of the Iowa Retirement Investors' Club (RIC) as disclosed in the Plan Document. I have established 457 and 401a accounts with a RIC provider. I understand that the total of all 457 contributions made in the calendar year must not exceed the federal limits as required by the Internal Revenue Code section 457. I understand that withdrawals may only be made upon termination of employment or qualification for an in-service distribution.					
	X					
	Participant Signat			Date		
Form Submission	RIC Account Fo	rm: Forward to your payroll office (shown b	elow) Provider accou	unt forms: Forward to the provid	ler	

Agent Use Only (Not required, but preferred) I am authorized to open RIC accounts for this employee. I verify 457/401a accounts have been established.

Print Agent Name	Agent Signature	Agent Phone Number	Date

Visit the RIC website at <u>https://das.iowa.gov/RIC/PSE</u> for full program details; select Your Plan Details from the left menu to access the RIC At-A-Glance and plan options specific to your employer's 457/401a plans.

Payroll Office Date Received:	<u>RIC Use Only</u> Date Pended:
Paycheck Effective Date:	Entered:
Name:	Checked: