

Iowa Retirement Investors' Club (RIC) 457/401a Plans

Look *forward* to retirement!

Spencer Hospital RIC Account Form

Personal Information	Name Social Security #							
	Last		First MI			Existing accounts need last 4 digits only		
	Address			City	Sta	ateZip		
	Birth Date	Phone (wor	k)	Phone (home)	Phone (ce	ell)		
Account Status	☐ New account (Must open 457/401 accounts with RIC provider) ☐ Change to existing account (This form replaces last completed de						request)	
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 paycheck amount & taxation	Pretax \$						
	Effective date: Changes are effective for the next available paycheck unless a future effective date is indicated.							
			☐ Begin as of					
	Future effe	ctive date (if desired)	1 check only					
			Final check					
Participant Signature								
	Participant Signa	ture			Date			
Form Submission	RIC Account Form: Forward to your payroll office (shown below) Provider account forms: Forward to the provider							
Agent Use On	ly (Not required,	<i>but preferred)</i> I am aut	horized to open RIC acc	ounts for this employee.	I verify 457/401a accounts have	ve been established.		
Print Agent Name		Ager	nt Signature		Agent Phone Number	Date		
		t <u>https://das.iowa.gov/</u> o your employer's 457/		details; select Your Plan	n Details from the left menu to	access the RIC At-A-Glance	e and	
Payroll Office Date Received:					RIC Use Only Date Pended:			
	ive Date:			Entered:				
Name:					<u> </u>			