

## WESTLAKE CITY SCHOOL DISTRICT SECTION 403(b) PLAN

## **SALARY REDUCTION AGREEMENT**

As an eligible employee under the Westlake City School District Section 403(b) Plan (the "Plan"), I hereby elect the following:

• I elect to have \$ deducted from each of my paychecks as an "Elective Contribution" under the Plan. [I acknowledge and agree that no deductions will be taken from my supplemental pay or other special pay.]	
<ul> <li>I elect that my Elective Contributions und "Approved TSA Provider" Plan Contra <a href="https://www.wlake.org/uploaded/Departme">https://www.wlake.org/uploaded/Departme</a></li> </ul>	act (A current list can be located at:
I acknowledge and agree that for each calendar year, the amount of my salary deferrals under the Plan will be subject to certain limits that are described in the Plan and the federal tax law; and that the Plan Administrator may therefore limit my Elective Contributions for each calendar year so that they will not exceed those limits.	
I understand that I may amend this Salary Reduction Agreement to the Treasurer's Office; and made effective until the first payroll date that is at least with the Treasurer's Office. I understand that I may awritten revocation notice to the Treasurer's Office; and made effective until 15 days after the date that I advised Election Contributions under the Plan. I also acl Agreement will be suspended for 6 months if I take a hard	that any amendment to this Agreement cannot be at 15 days after the date that I file a new Agreement revoke this Agreement at any time by submitting and that any revocation of this Agreement cannot be the Treasurer's Office that I wish to cease making knowledge and agree that my Salary Reduction
I acknowledge that I have received a copy of the Emagree that I have selected my Plan Contract pursuant the Plan Contract; that neither the Board, nor the Treathe Board, has given me any advice or has otherwis Contract; and that neither the Board, nor the Treasure Board, is in any way responsible for the investment pethe Plan Contract Provider, or any other matters pertain	o my own free will, and that I will be the owner of surer, nor any board member or other employee of e advised me in regard to my selection of a Planer, nor any board member or other employee of the erformance under the Plan Contract, the solvency of
Date	Signature
	(Print Name)