

Note: Please allow 5-7 business days for the authorization of your request. Missing or incomplete information will result in a delay of your request.

1 Participant Information

First Name	Last Name	Social Security Number (REQUIRED)/ Tax I.D. No	Date of Birth
Street Address		City	State
		Zip Code	Daytime Phone Number
School District Listed as Employer on this Account (REQUIRED)		Participant Email Address	

2 Beneficiary Designation Information

- I am MARRIED and designate my spouse named below to receive ALL death benefits from the Plan.
- I am MARRIED and designate the following person(s) to receive death benefits from the Plan (**SPOUSAL CONSENT REQUIRED** – see below). I
- am NOT MARRIED and designate the following person(s) to receive any death benefits. I understand that if I marry this is designation becomes void one year after my marriage.

Spouse Name	Spouse SSN	Spouse Email
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<input type="checkbox"/> Primary	Name	SSN	Relationship	%
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<input type="checkbox"/> Secondary	Email Address	Phone Number	Address	
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<input type="checkbox"/> Primary	Name	SSN	Relationship	%
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<input type="checkbox"/> Secondary	Email Address	Phone Number	Address	
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<input type="checkbox"/> Primary	Name	SSN	Relationship	%
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<input type="checkbox"/> Secondary	Email Address	Phone Number	Address	
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3 Spousal Consent (Required for Option 2, if married and spouse is not named beneficiary)

I consent to this designation, which eliminates all or part of the benefits otherwise payable to me from the Plan if my spouse dies.

Spouse's Signature	Date	Notary Public	Date
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4 Participant Signature

I hereby authorize my employer, after the date signed, to reduce my salary according to my employers 3121 FICA Alternative Plan provisions. Such reductions shall continue until I am no longer eligible to participate in the plan. I also authorized the above stated beneficiary designation changes (if applicable). THIS AGREEMENT WILL REPLACE ALL PRIOR AGREEMENTS.

Participant Signature (Required)	Date
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Statement Concerning Your Employment in a Job Not Covered by Social Security

Employee Name _____ Employee ID# _____

Employer Name _____ Employer ID# _____

Your earnings from this job are not covered under Social Security. When you retire, or if you become disabled, you may receive a pension based on earnings from this job. If you do, and you are also entitled to a benefit from Social Security based on either your own work or the work of your husband or wife, or former husband or wife, your pension may affect the amount of the Social Security benefit you receive. Your Medicare benefits, however, will not be affected. Under the Social Security law, there are two ways your Social Security benefit amount may be affected.

Windfall Elimination Provision

Under the Windfall Elimination Provision, your Social Security retirement or disability benefit is figured using a modified formula when you are also entitled to a pension from a job where you did not pay Social Security tax. As a result, you will receive a lower Social Security benefit than if you were not entitled to a pension from this job. For example, if you are age 62 in 2013, the maximum monthly reduction in your Social Security benefit as a result of this provision is \$395.50. This amount is updated annually. This provision reduces, but does not totally eliminate, your Social Security benefit. For additional information, please refer to Social Security Publication, "Windfall Elimination Provision."

Government Pension Offset Provision

Under the Government Pension Offset Provision, any Social Security spouse or widow(er) benefit to which you become entitled will be offset if you also receive a Federal, State or local government pension based on work where you did not pay Social Security tax. The offset reduces the amount of your Social Security spouse or widow(er) benefit by two-thirds of the amount of your pension.

For example, if you get a monthly pension of \$600 based on earnings that are not covered under Social Security, two-thirds of that amount, \$400, is used to offset your Social Security spouse or widow(er) benefit. If you are eligible for a \$500 widow(er) benefit, you will receive \$100 per month from Social Security (\$500 - \$400=\$100). Even if your pension is high enough to totally offset your spouse or widow(er) Social Security benefit, you are still eligible for Medicare at age 65. For additional information, please refer to Social Security Publication, "Government Pension Offset."

For More Information

Social Security publications and additional information, including information about exceptions to each provision, are available at www.socialsecurity.gov. You may also call toll free 1-800-772-1213, or for the deaf or hard of hearing call the TTY number 1-800-325-0778, or contact your local Social Security office.

I certify that I have received Form SSA-1945 that contains information about the possible effects of the Windfall Elimination Provision and the Government Pension Offset Provision on my potential future Social Security Benefits.

Signature of Employee _____ Date _____