

**SUSQUEHANNA UNIVERSITY
AGREEMENT FOR SALARY REDUCTION**

AGREEMENT, dated _____ between _____ (the "Employee") and
Susquehanna University (The "University") the parties hereto agree as follows:

Effective with respect to amounts earned on or after the _____ day of _____, 20 ____, the
Employee's basic compensation will be reduced by the amount(s) indicated below.

This agreement shall be legally binding and irrevocable as to each of the parties hereto while employment continues.

The amount of salary reduction/deduction (which may not produce a total contribution in excess of the limitations
under Sections 403(b) and 415 of the Internal Revenue Code) shall be:

I direct Susquehanna University to reduce my compensation and remit my contributions as follows:

Plan #104505

(If you contribute 5%, SU will contribute 9%)

Retirement Choice account: (pre-tax, reduction)

_____ % and/or

\$ _____ per pay

Roth 403(b) account: (after tax, deduction)

_____ % and/or

\$ _____ per pay

*IRS maximum amt.: ____yes ____no

**The IRS maximum amount typically changes every calendar year. If you choose to contribute the maximum, your
amount will change accordingly UNLESS you notify the payroll office otherwise.*

Employee's Signature

Date

Please Print Name

Social Security Number

Susquehanna University

By _____

Entered in Colleague

Sent to TIAA-CREF via (check one):

_____(initial)

____FAX____Mail____Online Enrollment

File: employee benefits