Ple	ease submit this form to Human Ro	esource - Benefits.			
Em	nployee Name:		Last Four of SSN:		
1.	<b>Deferral Authorization:</b> I authorize the City of Renton to deduct the following amount from each paycheck, to be contributed to my 457 Deferred Compensation Plan, administered through TIAA:				
		Dollar amount  per check		Percent of gross pay*	* Note: Deductions are calculated on gross pay and taken to the extent
	Pre-tax contributions	\$	or	%	possible after mandatory deductions, such as PERS. For example, if you
	After-tax Roth contributions	\$	or	%	elect 90% of pay, that full amount will
	TOTAL (per check)	\$	or	%	not be taken, if more than 10% of pay went to other deductions.
2.	Begin deferral on the <b>10t</b>			_	the date the election is signed. the date the election is signed.
	f left blank, change will be effective			_	_
3.	plan each calendar year. Both you on your behalf count toward the li	or employee contribur mit. Payroll deduction creases the limits occ is calendar year, plea 0	tions ns wi casio se no	and the City of Il stop automationally based on intify HR, so that	·
-	You are within 3 years of being eligible to retire under PERS or LEOFF, without actuarial reduction for early retirement, as listed below. LEOFF: Age 53 with 5 years of service PERS: Age 65 with 5 years of service, or age 62 with 30 years of service Note - there are a few exceptions for PERS 3. See HR if you have questions. This agreement will y signing, you authorize the payroll deductions for the contribution amount above. This agreement will service the payroll deductions.				
Ele	ction Form. This agreement supers			ral Election For	
Em	nployee Signature				Date
HR	R use only: Normal limit Age 5	50 limit Pre-retirem	nent Li	mit	

Approved by:

Date