

SALARY REDUCTION AGREEMENT

Between

Employee Name and Social Security Number

and

Employer

With respect to salary earned on or after _____ 20____, which date is subsequent to the dates on bottom of this form, the employer shall reduce the employee's present salary by: (check one)

A. \$_____ per pay period; or

B. \$_____ per year; or

C. _____% of salary

The employer will invest said funds in the Joint Retirement Board 403(b) Plan to provide retirement benefits for said employee, the contribution for which will be equal to the amount indicated in item A, B, or C above.

Either party may change or terminate this agreement, so that it will not apply to salary subsequently earned, by giving written notice.

Signature of Employee

Date

For the Employer: Print Name and Title

Signature

Date

THIS FORM SHOULD BE USED FOR ANY PORTION OF PENSION CONTRIBUTION MADE AS A RESULT OF ELECTIVE SALARY REDUCTION.