



Change in Deferred Compensation (ICMA-RC)

Employee Name _____
(Please print)

I authorize my employer to defer _____% or \$_____ from my pay **each pay period** to be contributed to my ICMA-RC account.

Please make this change effective on (choose one):

- The next available payday
- Effective with the paycheck dated on or nearest _____

I am over age 50, and therefore am using the additional contribution limit granted to those over 50.

Yes

I have consulted with the ICMA-RC plan rep and completed the necessary worksheets and declaration of retirement age in order to take advantage of the additional “pre-retirement” catch-up limit. (Please note that the “age 50” and the “**pre-retirement**” catch-up cannot be combined in the same plan year.)

Yes

Employee Signature

Date

For Payroll Use Only: