



FOR HR USE
Effective: _____

457(b) Contribution Enrollment Form

Name: _____

LEFTOVER BENEFIT ALLOWANCE:

I have leftover Benefit Allowance dollars of \$ _____ per pay period, which will be contributed to a 457(b) deferred compensation account. Please select where to contribute these funds, and if splitting between both options, how much per pay period to each (amounts must add up to total leftover Benefit Allowance per pay period):

- Colorado Retirement Association (CRA) – Empower Amount \$ _____ per pay period
- Equitable Amount \$ _____ per pay period

Signature

Date

VOLUNTARY PAYROLL CONTRIBUTION

I would like to make voluntary payroll contributions to a 457(b) deferred compensation account. Please select where to contribute the funds, the deduction amount and pre or post tax options below.

- Colorado Retirement Association (CRA) – Empower
 - Pre-tax contribution in the amount of \$ _____ per pay period
 - Pre-tax contribution of _____% of my earnings
 - Post-tax (Roth) contribution in the amount of \$ _____ per pay period
- Equitable
 - Pre-tax contribution in the amount of \$ _____ per pay period
 - Pre-tax contribution of _____% of my earnings
 - Post-tax (Roth) contribution in the amount of \$ _____ per pay period

Signature

Date

IMPORTANT: If you have not contributed to a CRA 457(b) deferred compensation account before, you will need to complete and submit the CRA 457(b) Enrollment Form, which can be located at:

www.montrosecounty.net ➤ County Offices ➤ Human Resources ➤ Montrose County Benefits
➤ 20XX Benefit Information ➤ Enrollment Forms ➤ CRA 457(b) Enrollment Form.

If you have not contributed to an Equitable 457(b) deferred compensation account before, you will need to contact our Equitable Representative, John McGrath, at (201) 961-4582. John will assist you in setting up an account. **This needs done immediately, as no contributions can be made without an account.**