

New enrollment:





403(B) Participant Enrollment/Payroll Deduction Form

Traditional 403(B) plan	
Roth 403(B) plan	
Updating current payroll deduction:	
Traditional 403(B) plan	
Roth 403(B) plan	
Today's Date:	
Employee Name:	Date of Birth:
Date of Hire:	
Address:	
SS# (Last 4 digits):	
Pre-Tax Contribution Amount (Per-Pay Period): \$	
Authorization:	
I authorize my employer to contribute the amount spe 403(B) Deferred Compensation Plan Account with N	ecified above from my pay each period, to be contributed to my lewport.
<u> </u>	st pay period of the calendar month following the date you ts@columbusilbrary.org or as soon as administratively possible
- Future Effective Date (cannot be earlier than the	e beginning of the following month):
Employee Signature:	Date:
Contribution Limit Information:	

Year	Maximum Contribution	Age-50 Catch-Up
2024	\$23,000	\$7,500
		(\$30,500 total)