



# City of Baltimore Deferred Compensation Plan 457(b) Deferral Change Form

This form is used to change your contribution amount in the Deferred Compensation plan.

## Plan Participant Information

Participant Name:	Account Number or SSN:
Mailing Address:	Date of Birth:
City, State, & Zip Code:	Phone Number:
Email:	

## Deferral Change

Minimum contribution amount is \$10 per pay. The current annual maximum contribution limit is \$19,000. Participants age 50 and older can contribute up to an additional \$6,000 for the current tax year.

	Per Pay Dollar Amount
Deferral Amount - 457(b) Pre-Tax	\$
Deferral Amount - 457(b) Roth	\$
Total	\$

**NOTE:** Current investment allocations will remain the same.

I authorize the above amount to be deducted from my pay warrant and to be invested in my Plan account. The change will continue until otherwise authorized in accordance with the Plan.

## Authorization

I authorize the City of Baltimore Deferred Compensation Plan to change the deferrals to the account identified above. I understand that per regulations, this change will not be effective before the first of the month subsequent to the date on which this change request is accepted by the Plan. I hereby certify under penalty of perjury that the information on this form is true and accurate to the best of my knowledge.

Signature:	Date:
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## Form Return

By mail: Nationwide Retirement Solutions  
PO Box 182797  
Columbus, OH 43218-2797

By fax: 877-677-4329

Overnight Address: Nationwide Retirement Solutions  
DSPF-F2  
3400 Southpark Pl Ste A  
Grove City, OH 43123-4856