

Deferred Salary Plan
Joint Industry Board of the Electrical Industry

ELECTION /CHANGE OF DEFERRAL AMOUNT FORM

Please complete this form and return it to your current employer.

Name: _____ PID #: _____

Address: _____

If you wish to enroll in the DEFERRED SALARY PLAN, check the "ELECTION TO PARTICIPATE" box below.

ELECTION TO PARTICIPATE: I hereby elect to participate in the DEFERRED SALARY PLAN and authorize my employer to defer from my compensation the percentage as indicated below:

_____ %
(any percentage in whole amounts between 1% and 100%)

Note: You may choose to contribute a fixed dollar amount rather than a percentage. If you wish to contribute a fixed dollar amount, please indicate that amount below:

\$ _____

If you elect to change the percentage or dollar amount in the DEFERRED SALARY PLAN, check the "AUTHORIZATION TO CHANGE DEFERRAL" box below.

AUTHORIZATION TO CHANGE DEFERRAL: I hereby elect to change the percentage or dollar amount in the DEFERRED SALARY PLAN, and authorize my employer to defer my compensation in the percentage or amount as indicated below:

_____ %
(any percentage in whole amounts between 1% and 100%)

Note: You may choose to change your contribution to a fixed dollar amount rather than a percentage. If you wish to contribute a fixed dollar amount, please indicate that amount below:

\$ _____

PLEASE RETURN THIS FORM TO EMPLOYERS PAYROLL DEPARTMENT

I understand that in making an election, my contributions will continue until such time as I increase, decrease or discontinue the percentage or dollar amount. I understand, also, that any contributions made to this Plan are subject to adjustment in accordance with IRS regulations.

Signature

Date