

Nationwide Retirement Solutions Payroll Authorization Card

(Please complete and submit to your Payroll Center)

I. Personal Information

_____-_____-_____
Social Security Number

_____-_____-_____
Date of Birth

Name

Address

Additional Address

City

State

Zip Code

Department

() - ____-_____
Work Phone

Participant Signature

Date

DC-4621-1224

Original-Payroll Center

Copy-Participant

II. Plan Information*

Plan Type: ☐ 457(b) ☐ 401(a) ☐ IRA Product

(Check only **ONE** plan type. If you have several plan types, then you must submit a payroll authorization card for each plan type.)

Action: ☐ Increase ☐ Decrease ☐ Cancel

Pre-tax contribution: \$ _____ **OLD** or _____% \$ _____ **NEW** or _____%

Roth contribution: \$ _____ or _____% \$ _____ or _____%

(457(b) Plan Only)

*You may make both pre-tax and Roth contributions.

Frequency: ☐ Bi-weekly ☐ Monthly ☐ Other _____

Payroll Deduction to begin on: (Date) _____

Catch Up Provision Utilized*: (select one option)

☐ Yes, 3-year ☐ Yes, Age 50+ ☐ Yes, Age 60-63 ☐ No

Normal Retirement Age: _____

* Contact Nationwide* at 1-877-NRS-FORU for further information on how catch up provisions work.

The earliest your enrollment or contribution change can start is the first day of the month following your completed request. Please remember, your employer's processing schedule will determine the actual effective date of the contribution. It is the Plan Sponsor's/ Pay Center's responsibility to ensure deferrals do not commence too early.

It's also important to note that the 457(b) 60-63 catch-up limit amount of 150% of the age 50+ catch-up limit for that year will need to be discontinued and revert only to the standard age 50+ catch-up for the calendar year the participant will reach age 64 and beyond.

I authorize my employer to reduce my salary by the above amount for credit to my account with my employer's Deferred Compensation Plan. This reduction will begin on the pay period specified above, but no sooner than is permitted by law or than is administratively practicable. This reduction will continue until otherwise authorized by my employer in accordance with the Plan.