



## ELECTION OF CONTRIBUTION RATE FOR 2017

\_\_\_\_\_  
(Association Name)

\_\_\_\_\_  
(Regional Network)

elects the following contribution rate for its employees participating in the Fund:

### Contributions to the Fund as a Percentage (%) of Pay

Check One	If YOU contribute	The Fund will add	The total added to Participants' accounts will be
<input type="checkbox"/>	10 %	4 %	14 %
<input type="checkbox"/>	7.5 %	3 %	10.5 %
<input type="checkbox"/>	5 %	2 %	7 %
<input type="checkbox"/>	3%	1.2%	4.2%

Please indicate your election by checking the appropriate box. Please return this form by e-mail, fax or mail by **October 31, 2016**. If we do not receive the form, the default rate for your Association contribution is 10%.

The contribution rate selected applies to all Participants within your Association; all Participants must be treated equally. The election is made once a year for the following calendar year and *cannot* be changed during the calendar year.

Participants' compensation data and all contributions must be received by the Fund no later than the 15<sup>th</sup> calendar day of the month following the contribution month. That is, contributions for January are due by February 15<sup>th</sup>, contributions for February are due by March 15<sup>th</sup>, and so on. Timely payment ensures compliance with the Department of Labor (DOL) regulations issued in 1997.

This Election of Contribution Rate has been authorized by the Board President, Chief Executive Officer/Executive Director or persons authorized by the Board to act on their behalf.

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(Fax Number)

\_\_\_\_\_  
(Email Address)