

Payroll Deduction Authorization
for
SCRS Supplemental 401k Retirement Account

Part A: To be completed by Employee

1. Employee Name: _____ 2. CWID: _____

3. Tax Option: Pre-Tax

 After-Tax (Roth)

4. Amount to be contributed annually: <i>(Check <u>one</u> option)</i>	Maximum Allowed \$20,500 \$27,000 (If age 50 or older) Annual Dollar Amount: \$ _____ Per Pay Amount: \$ _____ Percentage Amount: _____ % Stop/End Deduction
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5. Number of pay periods: 12 Month Employee (24 pay periods)
 9 Month Employee (18 pay periods)
 10 Month Employee (20 pay periods)
 10 ½ Month Employee (21 pay periods)

Voluntary deduction will start, change, or end on the next available pay period once form is received by the Payroll office. This deduction authorization will remain in force until otherwise instructed by a new Authorization Form.

Signature: _____ Date: ____/____/____

Part B: To be completed by Payroll Office

Date Received: ____/____/____
Next Available Pay Date: ____/____/____
Date entered: ____/____/____
Deduction Code: _____
Per Pay Deduction Amount: \$ _____

Signature: _____ Date: ____/____/____

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