

WESTERN WASHINGTON U.A. SUPPLEMENTAL PENSION PLAN

c/o Milliman Attn: Western Region DC Processing Center
P.O. Box 330
Seattle, WA 98111-0330
Phone: (800) 481-7336 Fax: (206) 903-0409

VOLUNTARY PRE-TAX 401(K) CONTRIBUTION ENROLLMENT FORM

Name: _____ Date of Birth: _____ Soc. Sec. No.: _____
First Middle Last

Address: _____
Street City State Zip

Daytime Telephone #: () _____ (in case we need to contact you) Home Local : _____

Employer: _____ Phone # _____

VOLUNTARY CONTRIBUTION AMOUNT:

Please fill in below the rate at which you wish your employer to deduct from your wages and contribute to your Supplemental Pension Plan Voluntary Pre-tax account. You must have been employed by your current employer for at least thirty (30) days before this deduction can be made. The annual contribution to your Voluntary Pre-tax Account **must not exceed the limits set each year by the I.R.S. (\$16,500 FOR 2010)**. If your contribution exceeds the maximum allowed by law, any excess will be returned to you, with interest, upon request.

You are responsible for keeping track of the ongoing total of your contributions to the Plan and whether your contributions are over the prescribed limits.

Voluntary Pre-Tax Contribution Rate Per Hour:

\$0.50/hr. \$1.50/hr. \$2.50/hr. \$4.00/hr. \$5.00/hr. \$6.00/hr.
(CIRCLE ONE)

This contribution will be effective as soon as received and processed by your employer. This contribution must be accounted for separately from your negotiated fringe benefit contribution.

NOTE: After your initial election, changes to increase or decrease your Voluntary Pre-Tax Contribution Rate may only be made JANUARY 1 or JUNE 1, or UPON CHANGE OF EMPLOYER. You may cancel your contributions at any time.

AUTHORIZATION:

By signing below, I hereby authorize my employer to deduct contributions at the above rate per hour from my wages to be deposited in my Voluntary Pre-Tax 401(k) Account in accordance with Plan rules.

Effective Date

Date Signed

Employee's Signature

INSTRUCTIONS:

Give White and Yellow copies of form **to your employer**. The employer keeps the White copy and sends the Yellow copy to Zenith Administrators with the first month's contributions. Employee keeps Pink copy.

WHITE - EMPLOYER COPY YELLOW - ZENITH ADMINISTRATORS COPY PINK - EMPLOYEE COPY