

**The Pension Design Group, LLC**  
**5880 Venture Drive, Suite B**  
**Dublin, Ohio 43017**  
**Phone: 614-789-9472**  
**Fax: 614-789-9942**

### **Change Request**

Contract/Case# \_\_\_\_\_

Employer Name: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

Participant's SSN: \_\_\_\_\_

### **Name or Address Change**

Name Change: \_\_\_\_\_

Address Change: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### **Contribution Change**

I elect to change my pre-tax salary deferral percentage as follows:

From: \_\_\_\_\_%                      To: \_\_\_\_\_%

Effective for the Payroll Beginning After: \_\_\_\_\_

**I authorize the employer to make the above changes, which will supersede all previous elections i have made.**

Participant Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Please file a copy with your payroll department, fax a copy to The Pension Design Group, LLC and retain a copy for your records.**