

MANCHESTER PUBLIC SCHOOLS

EMPLOYEE AGREEMENT TO PARTICIPATE IN THE TOWN OF MANCHESTER DEFINED CONTRIBUTION RETIREMENT PLAN

DATE: _____

NAME (PLEASE PRINT): _____

SOCIAL SECURITY NUMBER: _____

POSITION: _____

DEPARTMENT: _____

DATE OF HIRE: _____

To be completed by Business Office

EFFECTIVE PARTICIPATION DATE: _____
(To be filled in by Business Office)

I hereby acknowledge participation in the Town's (BOE) Defined Contribution Retirement Plan also known as the Money Purchase Plan. I have been given information explaining the plan and I will contact the Town's (BOE) Defined Contribution Retirement Plan's representative at VOYA (Joan Tucker at 860 580-1583 or Toll Free at 800 784-6386) in a timely manner to establish an account. I understand that my contributions will be deposited into a Solutions Portfolio with VOYA in my name until my choices for distribution are made with VOYA.

Signature

Date

Witness

Date