

**SEND OR FAX COMPLETED FORM TO:**

Nationwide Retirement Solutions
PO Box 182797
Columbus, OH 43218-2797
Phone: 877-693-2457
Fax: 877-677-4329

YOUR RETIREMENT SPECIALIST:

Phillip Edwards
Phone: 559-999-7971
Email: Phillip.edwards@nationwide.com

EZ Enrollment Form: County of Fresno 457(b) Plan

PERSONAL INFORMATION (please print)Name _____ ☐ Male ☐ Female

Social Security Number _____

Primary Beneficiary Name _____

DOB _____ Relationship _____ Percentage 100%

Contingent Beneficiary Name _____

DOB _____ Relationship _____ Percentage 100%

If additional beneficiaries are needed, please complete the beneficiary change form available at fresno457.com.

To the extent you desire to designate a beneficiary at a percentage less than 100%, you must complete the full enrollment form which is available at fresno457.com

After you enroll, you may change or update your beneficiaries and investment options by visiting fresno457.com or calling (877) 693-2457.

☐ **Paperless Delivery** I am consenting to receive statements, confirmations, terms, agreements and other information provided in connection with my retirement plan electronically.

Email Address _____

Participant Signature _____ Date _____

☐ I authorize the deferral amount as elected above subject to applicable timing restrictions.

☐ I do not wish to enroll at this time.

ENROLLMENT INSTRUCTIONS

☐ I want to enroll in the Program today and begin contributing:

☐ 8% ☐ 6% ☐ 4%

_____ % per paycheck (minimum 1%)

☐ Or enter per paycheck dollar amount here:

\$_____ (minimum \$10)

Your pre-tax contribution amount will be initially invested in the **Great West target date fund closest to your attainment of age 65**. This fund selection can be changed to a different investment option(s) by visiting fresno457.com. I understand that I can modify the amount that I contribute to the plan at any time. However, my initial enrollment or any modification cannot be effective until the first day of the month following the month of the request.

Please be sure to provide your Social Security Number, signature and date.

Nationwide Retirement Solutions and Nationwide Life Insurance Company (collectively "Nationwide") have endorsement relationships with the National Association of Counties, and the International Association of Fire Fighters-Financial Corporation. More information about the endorsement relationships may be found online at www.nrsforu.com.

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