



The Standard®

Savings Form

Diocese of Crookston 403(b) Plan
#813564

Sign up now! Simply complete the information below to begin saving in your retirement plan. *Return the completed form to your Human Resources department.*

YOUR INFORMATION

Social Security Number	Last Name	First Name	
Mailing Address	City	State	ZIP
Date of Birth (mm/dd/yy)	Date of Hire (mm/dd/yy)	Email Address	Phone

HOW MUCH DO YOU WANT TO SAVE?

Pre-Tax Savings (Check One)

The smallest amount you can contribute is 1% of your compensation. The most you can save during 2019 is \$19,000 (\$25,000 if you are age 50 or older). Other plan or legal limits may apply.

I elect to contribute as pre-tax contributions:

☐ _____ %

☐ No pre-tax amounts at this time. I elect to opt out of pre-tax contributions and understand I can enroll at a later time.

Roth Savings (Check One)

Enter the after-tax amount you wish to contribute to your Roth retirement savings account. The smallest amount you can contribute is 0% of your compensation. The most you can save during 2019 (including any pre-tax contributions) is \$19,000 (\$25,000 if you are age 50 or older). Other plan or legal limits may also apply.

☐ _____ %

☐ I elect not to make Roth contributions at this time. I understand I can change my election at a later time.

AUTHORIZATION

I authorize my employer and the plan administrator to deduct from my earnings the amounts determined by the designation above and to forward such amounts to the plan. I also direct my employer and the plan administrator to implement any other instructions I have provided on this form. I have read the Disclosure Statement on this form and, by signing here, agree to be bound by its terms. The employer, trustees and any others concerned with the administration of the plan are entitled to rely on these instructions; each shall be fully protected in taking or omitting any action under any provisions of the plan in reliance on this information.

Signature _____

Date _____

NEXT STEPS

Please return the completed form to your human resources department. When you submit this completed form, your employer will make your contribution request at the first opportunity allowed under the plan, assuming that you are eligible to participate.

This form will override any changes previously made using The Standard's automated phone system or online via Personal Savings Center.

To make changes to your contribution amount after you have enrolled, please complete a new Savings Form, available from your human resources department.

Visit www.standard.com/retirement to access Personal Savings Center to manage your account or you can call a customer service representative at 800.858.5420.

To select how you want your money to be invested, please use the Investing Form.

DISCLOSURE STATEMENT

You must notify The Standard within 15 days of receipt of your quarterly account statement if an error occurred, or if you requested and confirmed an investment transfer or directive change that was not completed during the period covered by the statement. You may give notice by contacting a customer service representative at **800.858.5420** or by emailing **savings@standard.com**. Unless you give such notice, The Standard will not be liable for any resulting loss to your account. In any case, The Standard will not be liable if circumstances beyond its control prevent the transactions, or if its liability is otherwise limited by regulation or agreement.

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