

**CITY OF PORTLAND  
GOVERNMENTAL 457(b) PLAN**

**EZ ENROLLMENT/PARTICIPATION AGREEMENT**

**PARTICIPANT INFORMATION**

Name \_\_\_\_\_  
 (Last) (First) (Middle Initial) **Dept. & Location** \_\_\_\_\_

Address \_\_\_\_\_  
 (Street) \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Date of  Hire  Rehire** \_\_\_\_\_

(City) (State) (ZIP Code)

Phone (\_\_\_\_\_) (\_\_\_\_\_) (\_\_\_\_\_) **Gender:**  Male  Female  
 Home Phone No. Work Phone No. Cell Phone No.

**DEFERRAL ELECTION**

I elect to contribute (*select applicable contribution type(s)*)  
 **Pre-tax Contribution** \$ \_\_\_\_\_ or \_\_\_\_\_ % **per payday**  **Roth After-Tax Contribution** \$ \_\_\_\_\_ or \_\_\_\_\_ % **per payday**  
 and continuing for the period of my employment or until changed or revoked in writing. NOTE: The amount that can be deferred each payday must be less than the amount of your net paycheck. The payroll system will not withhold a partial amount. If you want to defer most of your pay, please contact central payroll for an estimate of the maximum amount available for deferral.

**Effective Date:** This form must be received by the Human Resources by the 15<sup>th</sup> of the month in order to become effective the first payday of the following month.  
**Month Deferral Election to be Effective** \_\_\_\_\_ (*to be completed by the Employer*)

**EMPLOYEE AGREEMENT TO PARTICIPATE IN CITY OF PORTLAND GOVERNMENTAL 457(b) PLAN**

The City of Portland (Employer) has established the City of Portland Governmental 457(b) Plan (Plan) for the benefit of its employees. The Portland Development Commission is a Participating Employer under the Plan. The Plan provides that eligible individuals may elect to join and become participants in the Plan (subject to the limitations established in the Plan) upon executing and filing a Participation Agreement with the Employer.

The employee acknowledges the following:

- I have received a packet of information outlining the Plan and an enrollment kit which includes information about the contract and investment options.
- I elect to participate in the Plan and agree to contribute to the Plan in accordance with the Plan and Internal Revenue Code (Code).
- I agree that all rights to the contributions shall be governed by the terms and conditions of the Plan and Code.
- I agree that the elections indicated here will remain in effect until later changed or revoked by me by giving advance written notice to the City or my contributions reach the annual maximum dollar amount allowed under the Plan and Code. If the later occurs, my contributions will automatically stop. I acknowledge my contributions to the Plan will terminate automatically upon my separation from service or retirement.
- I understand I am electing to utilize the City of Portland EZ Enrollment / Participation process to establish a Plan account with Voya Financial® and will have my contributions invested in the default fund identified below, which has been designated by the Employer, determined by my Date of Birth provided above. I further understand that I can change my investment allocation at any time by using Account Login at [portland.prepare4myfuture.com](http://portland.prepare4myfuture.com) or contacting Voya at (800) 584-6001.

Your Date of Birth	Fund #	Fund Name
December 31, 1948 and earlier	3040	JPMCB SmartRetirement® Passive Blend Income Fund - CF Class
Between 01/01/1949 and 12/31/1953	3031	JPMCB SmartRetirement® Passive Blend 2015 Fund - CF Class
Between 01/01/1954 and 12/31/1958	3032	JPMCB SmartRetirement® Passive Blend 2020 Fund - CF Class
Between 01/01/1959 and 12/31/1963	3033	JPMCB SmartRetirement® Passive Blend 2025 Fund - CF Class
Between 01/01/1964 and 12/31/1968	3034	JPMCB SmartRetirement® Passive Blend 2030 Fund - CF Class
Between 01/01/1969 and 12/31/1973	3035	JPMCB SmartRetirement® Passive Blend 2035 Fund - CF Class
Between 01/01/1974 and 12/31/1978	3036	JPMCB SmartRetirement® Passive Blend 2040 Fund - CF Class
Between 01/01/1979 and 12/31/1983	3037	JPMCB SmartRetirement® Passive Blend 2045 Fund - CF Class
Between 01/01/1984 and 12/31/1988	3038	JPMCB SmartRetirement® Passive Blend 2050 Fund - CF Class
January 1, 1989 and later	3039	JPMCB SmartRetirement® Passive Blend 2055 Fund - CF Class

I certify that the information on this form is true, complete and accurate. I acknowledge I have read and understand the Plan Acknowledgment form which can be viewed at [City of Portland Governmental 457\(b\) Plan Custom Website](http://City of Portland Governmental 457(b) Plan Custom Website). I acknowledge a fee will be deducted quarterly from each investment option in my account; a portion of this fee is for Voya's record-keeping services and a portion is for the City's administrative services. I hereby authorize this contribution election.

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_ Portland Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

**RETURN COMPLETED FORM TO:**

<b>City of Portland</b> 106/404 – HR – Deferred Comp <i>or</i> 1120 SW 5 <sup>th</sup> Ave. Rm. 404 Portland, OR 97204-1912 Fax No: 503-823-3522	<b>PDC</b> 129/PDC – Deferred Comp <i>or</i> 222 NW 5 <sup>th</sup> Ave Portland, OR 97209-3859 Fax No. 503-823-6003
<i>To be completed by Employer</i> Employee SSN _____	Employee # _____

