



**Alternate Benefit Program (ABP)
Designated Service Provider Election and Allocation Form**

Employee Name _____ Effective Date _____

Banner ID Number _____ ABP Number _____
(if assigned)

Delayed Vested Immediately Vested Life Insurance yes not eligible at this time

Designated Service Providers

If you are in a delayed vesting status, select **one (1)** Designated Service Provider. If you are vested, select any number of providers and allocate the percentage of your contributions to each one, totaling 100%. Percentages must be whole numbers. **You must establish a valid account directly with the provider(s) you select.**

Selection:	<input type="checkbox"/> Initial Election	<input type="checkbox"/> Change of Election	Allocation
_____ AXA Financial (Equitable)			_____ %
_____ MassMutual (formerly The Hartford)			_____ %
_____ MetLife			_____ %
_____ Prudential Retirement Services			_____ %
_____ TIAA			_____ %
_____ VALIC			_____ %
_____ VOYA Retirement Insurance and Annuity Company			_____ %
			100 %

I elect to allocate my total employee and employer tax sheltered contributions as indicated above. The election will be effective with the beginning of the next pay period after receipt of this form. I have read and understand the information on the back of this application about my ABP membership.

Employee Signature _____ Date _____

Employee Benefits Representative _____ Date _____

ALTERNATE BENEFIT PROGRAM

INFORMATION FOR NEW APPLICANTS

A Designated Service Provider Election and Allocation Form must be completed to identify the investment provider(s) with which you want your contributions invested.

- **If you are eligible for immediate vesting**, the employer contributions become your property immediately upon investment in your account. **You may elect any number of investment providers and designate the percentage (in whole numbers) of the total contributions they each should receive.**
- **If you are not eligible for immediate vesting**, the employer contributions do not become your property until the beginning of the 13th month of your employment. **You may elect only one investment provider.**

If you do not file a Provider Election and Allocation Form, the ABP Administrator will enroll you with the investment provider selected as the default provider for the current plan.

You must file an application directly with the investment provider(s) you have elected or with the default investment provider if you fail to complete this form. If you fail to do so, you may lose possible revenue from your contributions. Additionally, the providers(s) you elected will return your contributions to your employer and the ABP administrator will enroll you with the default investment provider.

INFORMATION FOR VESTED ABP MEMBERS

ABP members may change their investment provider election and/or allocation once each quarter of the calendar year.