



401 PLAN CONTRIBUTION AMOUNT CHANGE FORM

To the Employer: ICMA-RC provides this form for your convenience. You do NOT have to use it if you prefer your own internal method for employees to request changes in their payroll deduction amount.

To the Employee: Use this form to make changes in the amount of your contribution to your ICMA-RC 401(a) Money Purchase or 401(k) Profit-Sharing plan.

Once you have completed this form, please submit it **directly to your employer** for payroll deduction updates.

You should have already established an ICMA-RC Money Purchase or Profit-Sharing plan account. **If not, please be sure to complete the appropriate enrollment form** and promptly return it to your employer. The enrollment form must be completed and submitted **before** contributions can start.

Employee Name: _____	Employee ID or SSN: _____
Employer Name: _____	State: _____
I authorize my Employer to deduct a mandatory* pre-tax deferral of _____% or \$_____ from my pay each pay period.	
I authorize my Employer to deduct a mandatory* after-tax deferral of _____% or \$_____ from my pay each pay period.	
I authorize my Employer to deduct an elective pre-tax deferral of _____% or \$_____ from my pay each pay period. (401(k) plans only.)	
I authorize my Employer to deduct a voluntary after-tax deferral of _____% or \$_____ from my pay each pay period.	
Change to be effective on ____ / ____ / ____ (mm/dd/yyyy).	
_____ Employee Signature	_____ Date
* Mandatory contribution amounts are established through the plan document. Changes to mandatory contribution amounts can only be accomplished through your employer's amendment of the plan document. See your employer for more information.	
_____ Employer Signature	_____ Date
Note: Please do not forward a copy of this form to ICMA-RC. This form is for employer use only.	