



STATE EMPLOYEES'
DEFERRED COMPENSATION PLAN
ENROLLMENT FORM

Type or print clearly in ink. Initial any corrections, additions, deletions or changes in pen. For more information, call the Deferred Compensation Office at 1-800/442-1300, 1-217/782-7006 or TDD 1-800/526-0844.

Scan forms to: CMS.Ben.DefComp@illinois.gov
Fax: 217-782-7640 ~ Office: 217-782-7006

Form fields for personal information: Last Name, First Name, Middle Initial, SSN, Street, City, State, ZIP Code, Birth Date, Agency or University, Work Phone, Home/Cell Phone, Work Address, Payroll Code #.

SECTION A: TRANSACTION TYPE [] Initial Enrollment [] Re-enrollment of a Former Participant

SECTION B: DESIGNATE A PLAN - Enrollment in both the pre-tax and Roth (after-tax) plans require a separate copy of this form for each Plan.

[] Pre-tax Deferred Compensation [] After-tax Roth

SECTION C: AMOUNT OF CONTRIBUTION - The minimum contribution is \$10 per pay period or \$20 per month, whichever is greater. Indicate the amount to be deducted from each paycheck in the space below.

_____ per pay period beginning with the [] First [] Second pay period in _____ (mo./yr.)

SECTION D: INVESTMENT REQUEST - Select one or a combination in which to invest your contributions. The percentages must total 100% and must be in whole numbers with no fractions.

These funds are one-step options that make it easy for you to invest for retirement. Simply choose the fund with a target date closest to the year in which you plan to retire and your funds will be managed for you.

Vanguard Target Retirement Trust:

- % Target Retirement 2060 Trust
% Target Retirement 2055 Trust
% Target Retirement 2050 Trust
% Target Retirement 2045 Trust
% Target Retirement 2040 Trust
% Target Retirement 2035 Trust
% Target Retirement 2030 Trust
% Target Retirement 2025 Trust
% Target Retirement 2020 Trust
% Target Retirement 2015 Trust
% Retirement Income Trust

Total %

These funds are the options if you want to select your own investment mix.

- % Vanguard Treasury Money Market Fund /VUSXX (money market)*
% INVESCO Stable Return Fund (stable value)
% Vanguard Total Bond Market Index Institutional Plus (fixed income)
% Vanguard Institutional Index 500 Trust (large company)
% Northern Trust ACWI ex US Fund (non-U.S. large company)
% Northern Trust Russell 2000 Index Fund (small-company value)

If an election mix is not made or is unclear, you will be defaulted to the Plan's Default Investment Alternative ("DIA").

*Money Market Investments: You could lose money by investing in the Fund. Although the Fund seeks to preserve the value of your investment at \$1.00 per share, it cannot guarantee it will do so.

READ THIS INFORMATION COMPLETELY BEFORE SIGNING

I hereby acknowledge receipt of a copy of the Plan and agree to the terms and conditions. I hereby acknowledge that I have received and read a prospectus for each mutual fund in which I am investing.

Signature X _____ Date _____

Send this completed form to your Agency Liaison - or send directly to the Department of Central Management Services.

Liaison Name _____ Agency _____
Date _____ Phone Number _____

Approval of Deferred Compensation Office required before any transaction takes place.
Date _____ By _____

In compliance with the State and Federal Constitution, the Illinois Human Rights Act, the Americans with Disabilities Act and Section 504 of the Federal Rehabilitation Act, the Department of Central Management Services does not discriminate in employment, contracts, or any other activity.