RSA-1 IOE Annual 07/11

Seal

ANNUAL INVESTMENT OPTION ELECTION RSA-1 DEFERRED COMPENSATION PLAN

Name							
	rst	Middle/Maiden			Last		
Social Security Number			_	Date of Birth	Month	Day	Year
Only if Member is					Worth	Day	real
Deceased, Provide Beneficiary Name							
	rst	Middle/Maiden	1		Last		
Beneficiary Social Secur	rity Number		_	Beneficiary Date of Bir			
					Month	Day	Year
Address		Street or P. O.	Box				
City			State			Zip Code	
Email Address				Phone Number			
I understand the following	ng regarding this inves	stment option election	n for my	account:			
	tion Election form MUS			ELIVERED to RSA-1 a each month.	t least 30	days pri	or to the
My election can be	made only once every	365 days after the effe	ective dat	e of my last election.			
My election will rem	nain in effect until a subs	sequent eligible electio	n is made	e, but it must remain in et	fect for 365	ō days.	
 I realize that I may 	stop deferrals at any tim	e; however, the election	on will rer	nain in effect if I later res	ume deferr	als.	
My election can app The continuous half- The continuous hal		-	_4 - - -				
				ar amount of the balance future deferrals on or a			te of this
	election, there will be No ill be invested as they ar		er in whic	ch my balance is invested	d. My acco	unt baland	e as well
I elect the following for my	Account Balance (che	eck only one):					
☐ Transfer % of the month-end balance in my RSA-1 fixed investment option to the RSA-1 stock investment option.			m	ransfer% of the month-end balance in my RSA-1 stock investment option to the RSA-1 ixed investment option.			
	from my RSA-1 fixe -1 stock investment opti			ransfer \$ from otion to the RSA-1 fixed			stment
I elect the following for my	Future Deferrals:						
□ Invest	_ % of my future deferra	als in the RSA-1 <i>fixed</i>	investme	nt option.			
□ Invest	_ % of my future deferra	als in the RSA-1 stock	investme	ent option.			
Signature of Member or Beneficiary if Member is	Deceased				Date		
STATE OF							
Before me appeared					person who	o subscrib	ed to the
foregoing instrument on th					F 5.5511 WIII	_ 03200110	50 to 1110
			_,	-			
	Sign	ature of Notary Public					

My Commission Expires