



401 (k) Change Form

Participant name:

Social security number:

Company name:

- I wish to **discontinue** contributions made to my 401k account.
- I wish to change my per check deduction percent from _____% to _____% (minimum 1%, maximum 20%).
- I wish to change my per check fixed dollar deduction amount from \$_____ to \$_____ (maximum \$11,000 per year - 2002).

Effective date:

Employee signature:

Date:

Please fax form to: Valerie Young, Benefits Coordinator at
(734) 591-1217