NACo
PARTICIPATION AGREEMENT, PAYROLL DEDUCTION AUTHORIZATION and SERVICE REQUEST for DEFERRED COMPENSATION PLAN

PLEASE READ THE REVERSE SIDE OF THIS FORM PRIOR TO COMPLETION

II. ENTITY NUMBER: ☐☐☐☐☐☐

Entity Name _____

Employer's Address _____

Payroll Center Name _____

Payroll Center Phone # (____) _____

I. Social Security Number ☐☐☐-☐☐-☐☐☐☐ Sex M ☐ F ☐

Date of Birth ☐☐-☐☐-☐☐ (Month Day Year)

Includible Compensation $ _____

Occupation _____

Check here if OBRA ☐ B

Name _____ (Last / First / MI)

☐ Check here if this is a name change

Address _____ (Number & Street) _____ (Additional Mailing Information)

_____ (City) ☐☐ (State) ☐☐☐☐☐-☐☐☐☐ (Zip Code)

☐ Check here if this is a new address

Home Phone ☐☐☐-☐☐☐-☐☐☐☐ Work Phone ☐☐☐-☐☐☐-☐☐☐☐ Ext. _____

III. TYPE OF REQUEST: ☐ New ☐ Change ☐ Reinstatement

Deferrals can start or increase no earlier than the first day of the month following the month this application is signed.

Start Deferral on: _____

Email Address: _____

IV. DEFERRAL SUMMARY

	OLD	NEW
Annuity Amount	$ _____	$ _____
Survivor Income	$ _____	$ _____
Universal Life[1]	$ _____	$ _____
Term Insurance[1]	$ _____	$ _____
SUB TOTAL	$ _____	$ _____
SPECIAL	$ _____	$ _____
TOTAL DEFERRAL	$ _____	$ _____

SPECIAL PAY PERIOD ENDING DATES

Start _____ (Annuity only) # of Pay Periods

Stop _____ _____

V. FREQUENCY:

☐ Weekly (W)-52 ☐ Monthly (M)-12

☐ Semi-Monthly (X)-24 ☐ Bi-Weekly (Z)-26

☐ Other _____

VI. CHANGES IN UNIVERSAL LIFE COVERAGE

☐ Increase ☐ Decrease ☐ Cancel

☐ Cancel and Transfer Cash Surrender Value to Annuity

Policy # _____ ☐ Current Allocation

$ _____ (Old Face Amt.) $ _____ (New Face Amt.) ☐ _____

*INCREASES IN FACE OR BENEFIT AMOUNTS REQUIRE A NEW LIFE APPLICATION. INDICATE CHANGES IN DEFERRAL AMOUNTS IN THE *DEFERRAL SUMMARY*.

VII. CATCH-UP Provision Utilized: ☐ Yes ☐ No

VIII. FUNDING OPTIONS – ***Only for New Business – Must be in Whole % and Total 100%***

ASSET ALLOCATION - Investor Destinations Series

_____% (NCV70N) Aggressive Fund (Svc. Class)
_____% (NCV71N) Moderate Aggressive Fund (Svc. Class)
_____% (NCV72N) Moderate Fund (Svc. Class)
_____% (NCV73N) Moderate Conservative Fund (Svc. Class)
_____% (NCV74N) Conservative Fund (Svc. Class)

INTERNATIONAL

_____% (NCV68N) Janus Adviser International Fund
_____% (NCV64N) Nationwide® International Index Fund (Class A)
_____% (NCV42N) Oppenheimer Global (Class A)
_____% (NCV59N) Putnam International Growth Fund (Class A)
_____% (NCV76N) SIT International Growth Fund
_____% (NCV34N) T. Rowe Price International Stock Fund[5]
_____% (NCV35N) Templeton Foreign Fund (Class A)

SMALL CAP

_____% (NCV57N) Brown Capital Mgmt Small Company Fund[5] (Inst'l Shares)
_____% (NCV69N) INVESCO Small Co. Growth Fund (Inv. Class)
_____% (NCV41N) Nationwide® NSAT Small Company Fund
_____% (NCV51N) Nationwide® Small Cap Fund[6] (Inst'l Svc. Class)
_____% (NCV63N) Nationwide® Small Cap Index Fund (Class A)

MID CAP

_____% (NCV58N) American Century Value Fund (Investor Class)
_____% (NCV60N) DEM Equity Fund (Institutional Shares)
_____% (NCV47N) Dreyfus Premier MidCap Stock Fund (Class A)
_____% (NCV18N) INVESCO Dynamics Fund (Investor Class)
_____% (NCV67N) Janus Adviser Aggressive Growth Fund
_____% (NCV62N) Nationwide® Mid Cap Mkt. Index Fund (Class A)
_____% (NCV66N) Strong Opportunity Fund (Investor Class)

LARGE CAP

_____% (NCV46N) American Century Inc. & Gr. Fund (Inv. Class)
_____% (NCV27N) American Century Ultra Fund[5] (Investor Class)
_____% (NCV21N) Dreyfus Appreciation Fund
_____% (NCV14N) Dreyfus Premier Third Century (Class Z)
_____% (NCV28N) Fidelity Contrafund[4, 5]

Funding Options cont'd

LARGE CAP CONT'D

_____% (NCV10N) Fidelity Equity-Income Fund[5]
_____% (NCV29N) Fidelity Magellan Fund[2, 5]
_____% (NCV30N) Fidelity OTC Portfolio[5]
_____% (NCV02N) Gartmore Total Return Fund (Class D)
_____% (NCV05N) MFS Mass. Investors Gr. Stock Fund (Class A)
_____% (NCV22N) MSDW Inst'l Fund Equity Gr. Portfolio (Class B)
_____% (NCV55N) Nationwide® Large Growth Fund[6] (Inst'l Svc. Class)
_____% (NCV45N) Nationwide® S&P 500 Index Fund (Inst'l Svc. Class)
_____% (NCV33N) Neuberger Berman Guardian Fund[5] (Inv. Class)
_____% (NCV43N) Neuberger Berman Partners Fund (Trust Class)
_____% (NCV04N) Putnam Investors Fund (Class A)
_____% (NCV23N) Putnam Voyager Fund (Class A)
_____% (NCV17N) SEI Index S&P 500 Index Portfolio[5] (Class E)
_____% (NCV03N) Seligman Growth Fund[5] (Class A)
_____% (NCV24N) The Investment Company of America[3, 5]

BALANCED

_____% (NCV31N) Fidelity Puritan Fund[5]

BONDS

_____% (NCV26N) Fed. U.S. Govt. Securities: 2-5 yr Trust[5] (Inst'l Shares)
_____% (NCV48N) Fidelity Advisor High-Yield Fund (Class T)
_____% (NCV32N) MAS Funds Fixed-Income Portfolio[5] (Inst'l Shares)
_____% (NCV07N) MFS High Income Fund[5] (Class A)
_____% (NCV61N) Nationwide® Bond Index Fund (Class A)
_____% (NCV56N) NSAT Nationwide Income Fund
_____% (NCV65N) PIMCO Total Return Fund (Class A)
_____% (NCV16N) The Bond Fund of America[3, 5] (Class A)

FIXED/CASH

_____% (NCV25N) AIM STIT Treasury Portfolio[5] (Institutional Class)
_____% (NCV75N) MDL Broad Market Fixed Income Fund
_____% (MOV06) Morley Stable Value Retirement Fund[5]
_____% (NCG) Nationwide® Fixed Annuity Contract
_____% (NCV06N) Nationwide® Money Market Funds (Prime Shares)

_____% **TOTAL FOR BOTH COLUMNS MUST EQUAL 100%**[7]

AVAILABILITY OF LIFE INSURANCE OPTIONS AND OTHER INVESTMENT OPTIONS MAY VARY BY PLAN. IF AN ALLOCATION IS MADE TO A CLOSED OR UNAVAILABLE INVESTMENT OPTION, THE ALLOCATION WILL BE MADE TO THE DEFAULT OPTION, THE NATIONWIDE® MONEY MARKET FUND.

1. The availability of the life insurance options is subject to each entity's approval and may not be available to you. See your enroller for details.
2. Fidelity Magellan is only available to entities that adopted the funds prior to October 30, 1997.
3. The Bond Fund and Investment Company of America Funds are only available to entities that adopted the funds prior to July 1, 1994.
4. Fidelity Contrafund is only available to entities that adopted the fund prior to July 1, 1998.
5. This fund is in the Passage Series and may not be available in your plan. Please contact the Public Sector Service Center at www.nrsforu.com or 1-877-NRS-FORU (1-877-677-3678) or your enroller for details.
6. These funds are part of the Prestige Advisor Series.
7. IF THE TOTAL INVESTMENT OPTION ALLOCATION PERCENTAGE EQUALS LESS THAN 100%, THE DIFFERENCE WILL BE INVESTED IN THE DEFAULT OPTION, THE NATIONWIDE® MONEY MARKET FUND. IF THE TOTAL INVESTMENT OPTION PERCENTAGE IS GREATER THAN 100%, YOUR APPLICATION WILL BE REJECTED AND YOUR ALLOCATIONS WILL NOT BE PROCESSED.

IX. ☐ **Check here if this is a change of beneficiary.** *(Any changes in the beneficiary designations supersede any prior beneficiary designations).*

Beneficiary _____ (Name (Please Print)) _____ (Relationship)

Contingent Beneficiary _____ (Name (Please Print)) _____ (Relationship)

☐ Please send me a copy of the Informational Brochure.

I AUTHORIZE MY EMPLOYER TO REDUCE MY SALARY BY THE ABOVE AMOUNT WHICH WILL BE CREDITED TO MY EMPLOYER'S PLAN. THE REDUCTION WILL CONTINUE UNTIL OTHERWISE AUTHORIZED IN ACCORDANCE WITH THE PLAN. THE WITHHOLDING OF MY DEFERRED AMOUNT BY MY EMPLOYER AND ITS PAYMENT TO THE DESIGNATED INVESTMENT OPTION(S) WILL BE REFLECTED IN THE FIRST PAY PERIOD CONTINGENT ON THE PROCESSING OF THIS APPLICATION BY THE PLAN ADMINISTRATOR IN CONJUNCTION WITH THE SET-UP TIME REQUIRED BY MY PAYROLL CENTER. THE REDUCTION IS TO BE ALLOCATED TO THE FUNDING OPTIONS IN THE PERCENTAGES INDICATED ABOVE.

I HAVE READ AND UNDERSTAND EACH OF THE STATEMENTS ON THE FRONT AND BACK OF THIS FORM, WHICH HAVE BEEN DRAFTED IN COMPLIANCE WITH SECTION 457 OF THE INTERNAL REVENUE CODE. I ACCEPT THESE TERMS AND UNDERSTAND THAT THESE STATEMENTS DO NOT COVER ALL THE DETAILS OF THE PLAN OR PRODUCTS.

_____ Participating Employee's Signature _____ Date

_____ Retirement Specialist's Signature/Number _____ Sales Director's Signature/Number _____ Principal's Signature