

Please fax completed form to Erin Guerke at 302.677.7031



# New Enrollment Form

## State of Delaware 457(b)

Last Name (Please Print)			First Name	M.I.	Last four digits of SSN or
Home Address - Street					Employee ID #
City / Town	State	Zip	Date of Birth		

Please specify a **PER PAY CYCLE**, whole dollar, deduction amount. For 2011, the minimum amount **per pay** is \$10.00. (The maximum amount for the **year** is \$16,500, \$22,000 if you will turn age 50 in 2011.)

**Per Pay Cycle Deduction Amount: \$\_\_\_\_\_**

**Investment Designation:** By using this form to enroll in the Deferred Compensation Plan, your contributions will automatically be invested in the Plan's default fund, which is currently the Fidelity Freedom Funds. Your contributions will be deposited into one of the below funds based on your date of birth.

<b>Freedom Income Fund</b> 1/1/1900-12/31/1932	<b>Freedom 2000 Fund</b> 1/1/1933-12/31/1937	<b>Freedom 2005 Fund</b> 1/1/1938-12/31/1942	<b>Freedom 2010 Fund</b> 1/1/1943-12/31/1947
<b>Freedom 2015 Fund</b> 1/1/1948-12/31/1952	<b>Freedom 2020 Fund</b> 1/1/1953-12/31/1957	<b>Freedom 2025 Fund</b> 1/1/1958-12/31/1962	<b>Freedom 2030 Fund</b> 1/1/1963-12/31/1967
<b>Freedom 2035 Fund</b> 1/1/1968-12/31/1972	<b>Freedom 2040 Fund</b> 1/1/1973-12/31/1977	<b>Freedom 2045 Fund</b> 1/1/1978-12/31/1982	<b>Freedom 2050 Fund</b> 1/1/1983-12/31/1987

**Enrollment cannot be completed unless each box below has been checked.**

- I understand that I will receive a beneficiary designation form to complete and return to Fidelity.
- I understand that I have defaulted and will receive a list of the current investment options available so that I can actively make a selection.
- I acknowledge that I have been provided with a copy of the [Fidelity Freedom Fund prospectus](#). The prospectus can be found online at [www.treasurer.delaware.gov](http://www.treasurer.delaware.gov) or [www.fidelity.com/atwork](http://www.fidelity.com/atwork)

Signature of Employee: \_\_\_\_\_ Date: \_\_\_\_\_

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*(Contributions will begin with the first available paycheck of the month following the month your form is received)*