



BENCOR National Government Employees Retirement Plan Enrollment Form

401(a) 403(b)

GENERAL INFORMATION

Employer: SCHOOL DISTRICT OF HILLSBOROUGH COUNTY

Worksite Location: _____

Address: _____

City: _____ State: _____ Zip: _____

Participant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

SS#: _____ Date of Birth: _____

Telephone #: _____

BENEFICIARY DESIGNATION

Participant Primary Beneficiary: _____

Address: _____

City: _____ State: _____ Zip: _____

SS#: _____ Date of Birth: _____

Relationship: _____

% Share: _____

Participant Contingent Beneficiary: _____

Address: _____

City: _____ State: _____ Zip: _____

SS#: _____ Date of Birth: _____

Relationship: _____

% Share: _____

Participant Contingent Beneficiary: _____

Address: _____

City: _____ State: _____ Zip: _____

SS#: _____ Date of Birth: _____

Relationship: _____

% Share: _____

Married Participant
I understand that I must select my spouse as sole Primary Beneficiary under this Plan unless he/she consents in writing to my naming another Primary Beneficiary. (Please contact BENCOR Administrative Services for a Spousal Consent form if naming a Primary Beneficiary other than your spouse.)

Unmarried Participant
I understand that the following designation becomes null and void in the event of my marriage. I will promptly inform BENCOR of any change in my marital status.

I understand that if I outlive my Primary Beneficiary, benefits will be paid to my estate on my death unless I designate a Contingent Beneficiary(ies). (If additional space is required, please attach a separate page providing all designation information and the percentage share for each.)

Signature _____ Date _____

INVESTMENT ELECTION

Please ensure that the investment instructions provided below are accurate. We will be relying on your instructions to allocate your contributions. Please note that investment allocation percentages must total 100%.

All funds are deposited into the Guaranteed Pooled Fund unless you select other investment options below.

The investment allocation indicated below is for :

- Current Investments
- Future Investments
- Both Current & Future Investments

Withdrawals due to Employer-initiated events may be subject to restrictions and/or adjustments.

Stable Value Fund

_____ % TFLIC Guaranteed Pooled Fund

Stock Funds

- _____ % Transamerica Partners Large Value
- _____ % Transamerica Partners Stock Index
- _____ % Transamerica Partners Large Core
- _____ % Transamerica Partners Large Growth
- _____ % Transamerica Partners Mid Value
- _____ % Transamerica Partners Mid Growth
- _____ % Transamerica Partners Small Value
- _____ % Transamerica Partners Small Growth
- _____ % Transamerica Partners International Equity

Multi-Asset Funds

- _____ % Transamerica Asset Allocation-Short Horizon
- _____ % Transamerica Asset Allocation-Short/Inter Horizon
- _____ % Transamerica Asset Allocation-Intermediate Horizon
- _____ % Transamerica Asset Allocation-Inter/Long Horizon
- _____ % Transamerica Asset Allocation-Long Horizon

Bond Funds

- _____ % Transamerica Partners Core Bond
- _____ % Transamerica Partners High Yield Bond

100 % Total

Please return completed form to:

BENCOR Administrative Services, Inc.
8488 Shepherd Farm Drive
West Chester, Ohio 45069

For a prospectus on any of the options listed above or for customer service call **1-888-258-3422**.

Information

FRAUD WARNING

In some states, we are required to advise you of the following:

Florida Residents Only: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Applicable to everyone, except Florida, New York, Oregon and Virginia Residents: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act which is a crime, and subjects such person to criminal and substantial civil penalties.