

## **Voluntary Salary Deferral Agreement**

Under a Private Employer's Eligible Internal Revenue Code Section 457(b) Deferred Compensation Plan

| By this agreement Ch  | <u>HAPMAN UNIVERSITY, ONE UN</u><br>(Name and  | NIVERSITY DRIVE, ORAN<br>address of Employer)   | GE CA 92866   |                               |
|---|--|---|---|-------------------------------|
| (Hereinafter called the   | e Employer) and by   |   |   | of                            |
|   |  | (Name of Employee)  |   |                               |
|   | (Address o   | of Employee)  |   | ,                             |
| (Hereinafter called the   | e Participant), the parties hereto   | agree as follows.   |   |                               |
| subsequent to the extended the same time, the Er                        | to amounts paid or otherwise mecution of this Agreement, the Employer will contribute a correspondensation plan, under which the   | mployee's salary will be reconding amount to the eligit   | duced by the amount ind<br>ble Internal Revenue Ser | icated below. At vice Section |
| paid or otherwise made Agreement as of the following amounts subsequent | be legally binding and irrevocab<br>de available while this Agreemen<br>first pay period commencing with<br>cation or termination by giving at<br>y paid or otherwise made availal<br>of the salary deferral shall be as | nt is in effect. Either party in or during the first month folleast 30 days' notice so the ble. | may modify or otherwise ollowing receipt of satisfa | terminate this actory written |
| Percentage of Pay   | Insurance Company  |   |   |                               |
| %   | TIAA-CREF  |   |   |                               |
|   |  |   |   |                               |
| The amount deferred<br>Revenue Code 457(b                               | hereunder will produce a total do<br>).  | eferral that does not excee   | d the applicable limitatio                          | ns of Internal                |
| (Participant Signatur   | e)   | (Employer Signature)  |   | _                             |
| (Date)  |  | (Date)  |   | _                             |
| (Employee ID #)   |  | (Title)   |   | _                             |