

# Wisconsin Deferred Compensation Program

## Quick Enrollment Card

The Wisconsin Deferred Compensation (WDC) Program offers you powerful tools to help you reach your retirement dreams. As a supplement to other retirement benefits or savings that you may have, the WDC allows you to save and invest extra money for retirement. You can choose to contribute to a traditional account on a before-tax basis and/or to a Roth account on an after-tax basis.

You will be able to save and invest consistently and automatically, choose from a variety of investment options, and learn more about saving and investing for your financial future. You are immediately eligible to enroll upon your hire date, and there is no minimum amount per paycheck required. So what are you waiting for? Get started today!

After you complete this form, your contributions will be invested in a target date (lifecycle) fund<sup>1</sup> chosen by the Deferred Compensation Board. If you wish to contribute to any of the other WDC investment options immediately upon your enrollment, fill out a complete enrollment form. Call the WDC toll free at (877) 457-WDCP (9327) or visit the website at [www.wdc457.org](http://www.wdc457.org) for more information.<sup>2</sup>

**Enroll today by completing the information below and  
returning this form to the address listed on the reverse side.**

I would like to enroll in the WDC Program and voluntarily contribute \$ \_\_\_\_\_ per pay period of my eligible compensation on a before-tax basis.

I would like to enroll in the WDC Program and voluntarily contribute \$ \_\_\_\_\_ per pay period of my eligible compensation to a Roth account on an after-tax basis.

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Date of Birth \_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Work \_\_\_\_\_ Date of Hire \_\_\_\_\_

Employer/Division \_\_\_\_\_ Email Address \_\_\_\_\_

Gender:  Male  Female      Marital Status:  Married  Unmarried

**Investment Option:** By completing this form, I understand that I am directing that my contributions for my Program account be invested in the Vanguard Target Date Fund that most closely corresponds with the year in which I will turn 65. I acknowledge that information about the target date investment options and information about other Program investment options, including prospectuses, disclosure documents and fund data sheets, have been made available to me. I understand the risks of investing and that all payments and account values may not be guaranteed and may fluctuate in value. I understand this investment election will remain effective until I make a subsequent investment election for my Program account. I understand that I can change this election at any time by logging on to my account at [www.wdc457.org](http://www.wdc457.org) or by calling (877) 457-WDCP (9327).<sup>2</sup> A Personal Identification Number (PIN) that gives you access to your account via the website or phone will be mailed to you soon after your application is processed.<sup>3</sup> For more information, please contact your Program Administrator.

**My Account:** I understand that it is my obligation to review all confirmations and quarterly statements for discrepancies and errors. If I do not communicate a request for correction within 90 days from the date of the statement, account information shall be deemed accurate and acceptable to me.

**Beneficiary Designation:** I understand that I must choose a beneficiary of my account by filing a separate beneficiary designation form with Great-West Financial<sup>SM</sup>. I can also submit my beneficiary designation online. Until a signed beneficiary designation form is received, the beneficiary will be determined in accordance with the terms of the WDC Plan and Trust Document (<http://www.fascore.com/PDF/wisconsin/planGuide.pdf>).

I understand that a deferral agreement must be entered into prior to the first day of the month that the deferral will be made. By signing this form, I acknowledge that I have previously received detailed information about the WDC Program and understand that my participation in the WDC must be in compliance with application requirements of the WDC Plan and Trust Document and the Internal Revenue Code. I understand that the Service Center is required to comply with the regulations and requirements of the Office of Foreign Assets Control, Department of the Treasury ("OFAC"). As a result, the Service Center cannot conduct business with persons in a blocked country or any person designated by OFAC as a specially designated national or blocked person. For more information, please access the OFAC website at <http://www.treasury.gov/about/organizational-structure/offices/Pages/Office-of-Foreign-Assets-Control.aspx>.

Employee Signature \_\_\_\_\_

Date \_\_\_\_\_

## Mail or fax completed form to:

WDC Program  
5325 Wall St., Suite 2755  
Madison, WI 53718  
Fax: (608) 241-6045

## How to contact the WDC:

Call: (877) 457-WDCP (9327)  
Visit: [www.wdc457.org](http://www.wdc457.org)  
Email: [wdcprogram@gwrs.com](mailto:wdcprogram@gwrs.com)

*A Personal Identification Number<sup>3</sup> (PIN) that gives you access to your account via the Web or phone will be mailed to you soon after your application is processed.*

*Please consider the investment objectives, risks, fees and expenses carefully before investing. For this and other important information, you may obtain mutual fund prospectuses for registered investment options and/or disclosure documents from your registered representative or Program website. Read them carefully before investing.*



1 The date in a target date fund's name represents an approximate date when an investor is expected to retire (which is assumed to be at age 65) and/or begins withdrawing money. The principal value of the funds is not guaranteed at any time, including the target date. For more information, please refer to the fund prospectus and/or disclosure document.

2 Access to the voice response system and the website may be limited or unavailable during periods of peak demand, market volatility, systems upgrades/maintenance or other reasons.

3 The account owner is responsible for keeping the assigned PIN confidential. Please contact Great-West Financial immediately if you suspect any unauthorized use.

**Core securities, when offered, are offered through GWFS Equities, Inc. and/or other broker dealers.**

GWFS Equities, Inc., Member FINRA/SIPC, is a wholly owned subsidiary of Great-West Life & Annuity Insurance Company.

Great-West Financial<sup>SM</sup> refers to products and services provided by Great-West Life & Annuity Insurance Company (GWL&A), Corporate Headquarters: Greenwood Village, CO; Great-West Life & Annuity Insurance Company of New York (GWL&A of NY), Home Office: White Plains, NY; its subsidiaries and affiliates. The trademarks, logos, service marks, and design elements used are owned by GWL&A. ©2013 Great-West Life & Annuity Insurance Company. All rights reserved. Form# CB1080QE (12/2013) PT186982