



**Participant Enrollment
Governmental 457(b) Plan**

**Massachusetts Deferred Compensation SMART Plan - Mandatory
OBRA**

98966-02

Participant Information

Last Name			First Name			MI			Social Security Number								
Address - Number & Street									E-Mail Address								
City			State			Zip Code			<input type="checkbox"/> Married		<input type="checkbox"/> Unmarried		<input type="checkbox"/> Female		<input type="checkbox"/> Male		
Mo			Day			Year			Mo		Day		Year				
()						()						Date of Birth			Date of Hire		
Home Phone						Work Phone						Do you have a retirement savings account with a previous employer or an IRA? <input type="checkbox"/> Yes or <input type="checkbox"/> No					

Check box if you prefer to receive quarterly account statements in Spanish.

Important Notice: Employees participating in the Massachusetts Deferred Compensation SMART Plan - OBRA Mandatory Plan (the Plan) must complete Social Security Form SSA-1945. The Plan has been designated as an alternative retirement system for part time employees not covered by their employers retirement system. The SSA-1945 explains the potential effects of the Windfall Elimination Provision and Government Pension Offset Provision under the Social Security law which may reduce the amount of your Social Security retirement or disability benefits, and/or benefits received by you as a spouse or an ex-spouse. If you have any questions regarding SSA-1945 or if you have not completed SSA-1945, please contact your employer.

Statement Delivery - Participant quarterly statements are sent regular mail via the U.S. Postal Service. If you prefer an environmentally friendly alternative, please visit www.mass-smart.com for fast and easy enrollment in our Online File Cabinet service.

Payroll Information

Division Name		To be completed by Representative:		Division Number	
---------------	--	------------------------------------	--	-----------------	--

Investment Option Information (applies to all contributions) - Please refer to your communication materials for information regarding each investment option.

I understand that funds may impose redemption fees on certain transfers, redemptions or exchanges if assets are held less than the period stated in the fund's prospectus or other disclosure documents. I will refer to the fund's prospectus and/or disclosure documents for more information.

<u>INVESTMENT OPTION NAME</u>	<u>INVESTMENT OPTION CODE</u> (Internal Use Only)	
SMART Capital Preservation Fund.....	MELINC.....	100%