



**Western Washington U.A.  
Supplemental Pension Plan**

1750 S.W. Harbor Way, Suite 400  
Portland, OR 97201-5167  
www.supplementalpension.com



**VOLUNTARY AFTER-TAX CONTRIBUTIONS ENROLLMENT FORM**

In accordance with Section 4.6 of the Western Washington U.A. Supplemental Pension Plan, I hereby enroll to make Voluntary After-Tax Contributions to my Individual Account.

1. \_\_\_\_\_  
Name of Applicant (please print)
  2. \_\_\_\_\_  
Social Security No.
  3. Home Address: \_\_\_\_\_  
Street Address City and State Zip
  4. Phone No.: \_\_\_\_\_ 5. Local No.: \_\_\_\_\_
  6. My present or most recent employer is \_\_\_\_\_.
  7. Marital Status:  Married  Single
  8. Date of Birth: \_\_\_\_\_
  9. Attached is a check in the amount of \$ \_\_\_\_\_, representing a voluntary after-tax contribution to my account in the Western Washington U.A. Supplemental Pension Plan.
- OR
- Deduct the following amount from each paycheck \$ \_\_\_\_\_.
10. Signature of Applicant \_\_\_\_\_  
Date: \_\_\_\_\_

**SECTION 4. CONTRIBUTIONS AND INDIVIDUAL ACCOUNTS**

**4.6 Voluntary After-Tax Contributions.** A Participant may make voluntary after-tax contributions to this Plan. Voluntary after-tax contributions must be made by the Participant in cash and in accordance with the rules established by the Trustees. Voluntary after-tax contributions shall be credited to the Participant's Individual Account, but accounted for separately, and shall be immediately and 100% vested as described in subsection 3.2.

At any time, but not more frequently than once per calendar year, a Participant may elect to withdraw his voluntary after-tax contributions from his Individual Account and the net earnings thereon in a manner which is consistent with the provisions of Section 7 including, but not limited to, all notice and consent requirements.