

CollegePlaza x Pomona, CA 91766-1854 x (909) 469-5371 x Fax (909) 469-5489

MEMORANDU M

To: All Emplo yees
From: Human Resou rces/Emplo yee Benefits
Subject: 403(b) Salary Reduction Agreement
Date: December 1, 2022



403(b) Plan Salary Reduction Agreement

BY THIS AGREEMENT, made between ______ (the "Employee") and

Form: 403(b) SRA Rev. 01/01/2023