



**New York State Deferred Compensation Plan
Salary Reduction Agreement**

This document represents an agreement between Monroe Community College and the employee.

By this agreement, made between (employee name) _____ and Monroe Community College the parties hereto agree as follows:

Reduce my salary by a pay period amount of \$_____. The amount shall not exceed the employee's statutory exclusion allowance for 2010 of \$16,500.

Catch-up provisions are available through the New York State Deferred Compensation plan representative (refer to enrollment application).

Signature _____ Date _____

Banner ID or SS# _____ Employment Status: Full-Time _____
Adjunct _____
Part-Time _____

Human Resources Use Only:

Effective with the receipt of verification from New York State Deferred Compensation, your Salary Reduction Agreement deduction will begin the pay period of_____.

The per pay period amount of \$_____ will be deducted for the remainder of the calendar year unless maximum of \$16,500 has been reached.

New York State Deferred Compensation will notify MCC if A Catch-up provision applies.

HR Signature _____ Date _____ HR Approval _____

Original: Payroll Department

Copy: HR Department

Copy: MCC Employee