

TDRA AND PENSION PLAN CONTRIBUTION FORM

Please complete both the top and bottom sections of this Form. Send the top section with your contribution to Pension Fund, and retain the bottom section for your records.

- PLEASE TYPE OR PRINT CLEARLY -

Member Name	/ * 4 44 *	(1 //6 //)	Account No	Member ID No	
				Employer No	
		ON PLAN CONTRI		1 7	
The contribution consists					
S		in Employer Dues.			
\$		in Member Dues made or	n a \square pre-tax basis	or on an after-tax basis.	
II. COMPLETE	FOR TDRA	A CONTRIBUTIONS	S		
The contribution consists	of:				
\$		in Employer Contribution	18.		
wants to chang	ge the amount	t of his or her pre-tax an	nd/or Roth contribut	s <u>or</u> on a Roth (after-tax) basis. IMPOR ions, the member must complete a new tions made on or after January 1, 2022 o	Salary Contribution
Submitted By			Title	Phone ()_	
SEND FORM(S) WITH	I CHECK OR	BANK INFORMATION		n Fund of the Christian Church ox 639905, Cincinnati, OH 45263-9905	
TDRA and Pension Plan	Contribution F	Form 04-22			4814-9890-7609.4
And Pen	of the C	Christian Church		TDRA AND PENSION PERSION PERSION FORM	
Mamhar Nama				Member ID No	
Member Name (first)	(middle)	(last/family name)			
				Employer No.	
I. COMPLETE F	OR PENSI	ON PLAN CONTRI	BUTIONS		
The contribution consists					
\$		in Employer Dues.			
\$		_		or on an after-tax basis	
II. COMPLETE	FOR TDRA	A CONTRIBUTIONS	S		
The contribution consists					
		in Employer Contribution			
wants to chang	ge the amount	t of his or her pre-tax an	id/or Roth contribut	s <u>or</u> on a <i>Roth (after-tax)</i> basis. <i>IMPOR</i> ions, the member must complete a new tions made on or after January 1, 2022 o	Salary Contribution
Submitted By			Title	Phone ()_	
SEND FORM(S) WITH	I CHECK OR	BANK INFORMATION		n Fund of the Christian Church ox 639905, Cincinnati, OH 45263-9905	