

J.B. Sullivan, Inc. Retirement Plan**Contribution Change Form**

Plan Number: 201222

Personal Information

Name: _____

SSN: _____-_____-_____

Option 1 - Change Contributions

I request that my future earnings from the company be reduced by the deferral percentage changes(s) shown below. The amounts deducted from my earnings will be contributed for me to the J.B. Sullivan, Inc. Retirement Plan. This modification is binding and irrevocable with respect to amounts for future earnings until changed by me in writing in accordance with plan provisions. This modification will also continue in effect as long as I am a participant in the above listed Plan.

Traditional deferral (pre-tax)

Change my deferral to _____% (1% to 100%) (but not to exceed the maximum allowed by law) of earnings per pay period.

This change will be effective the first pay period after January 1, April 1, July 1 or October 1 after our payroll department receives this form.

Option 2 - Discontinue Contributions

I request to discontinue my contribution to J.B. Sullivan, Inc. Retirement Plan. I understand I may resume contributions on the first pay period after January 1, April 1, July 1 or October 1 provided I have completed a Contribution Change Form before that date. This change will be effective as soon as administratively feasible after the Plan Administrator receives this form, unless I specify a later pay period date ____/____/____.

Participant Signature: _____

Date: _____