ANNUAL LEAVE LUMP SUM DEFERRAL FORM

Employee Name:		SSN:	
•	, state employees who terminate employment ver 401(k) and/or 457 Plan account.	may defer their unused annual leave	
	ual Leave Balance (Hours):	As of :	
Please check the app	ropriate box(es):		
Before-Tax:			
401(k)	Amount/Percentage to Contribute:	YTD Contributions:	
457	Amount/Percentage to Contribute:	YTD Contributions:	
After-Tax:			
401(k) Roth	Amount/Percentage to Contribute:	YTD Contributions:	
457 Roth	Amount/Percentage to Contribute:	YTD Contributions:	
Please note: The ma	aximum annual deferral limit for 2025 is \$23,50	0 for those employees under the age of 50	
and \$31,000 for thos	e employees over age 50 for each.		
Signature:		Date:	

Form must be returned to Payroll no later then the last day of employment.