



REQUEST FOR SUSPENSION OF 401(k) DEDUCTIONS ON NON-REGULAR PAYDATES

By my signature below, I hereby confirm that I request to suspend participation in the Roman Catholic Archdiocese of Boston 401(k) Retirement Savings Plan for any pay dates that fall outside my regularly scheduled pay dates, effective on the date noted below. I understand that suspension on these dates means I will not be permitted to defer compensation from any such paychecks and that I will not receive an employer matching contribution for any such paychecks. This request for suspension overrides any written Salary Deferral Forms for those non-regular pay dates only. This request is presumed granted by the payroll contact at my location and remains in effect until it is revoked.

Employee/Priest Name: _____

Employee/Priest Signature: _____

Effective Date: _____

COMPLETE THE SECTION BELOW IF THE ABOVE SUSPENSION REQUEST IS COMPLETED AND THEN REVOCATION OF THE SUSPENSION IS REQUESTED AT A LATER DATE.

Revocation of Request: By my signature below, I hereby revoke this Request for Suspension and ask that all checks that fall outside my regularly scheduled pay dates include 401(k) deductions consistent with the Salary Deferral Form in effect as of the date of those checks. This revocation is effective on the date noted below.

Employee/Priest Signature: _____

Effective Date: _____