



BPPA
 457 Deferred Compensation Plan
 Percentage Based Deduction Authorization Form
 (Must be submitted when choosing percentage method)

Date: _____ Employee ID: _____

Employee Name: _____

Department Name: **Boston Police Department** Union: **BPPA**

I have gone online to the Great-West website and selected percentage as an option and indicated the percentage amount indicated above. I hereby authorize the City of Boston to deduct from my wages each pay period the percentage type and amount indicated below.

Deduction Type (select plan type):

DC01 (Regular Plan Type): _____ **DC501** (Age 50 or over): _____ **DCCU1** (Special Catch-up): _____

In addition to the percentage selected below, I would like a flat additional amount to be deducted. Yes _____ amount _____ No _____

Percentage Type:

Percent of Total Gross: _____ Percentage Amount: _____

Percent of Special Earnings: _____ Percentage Amount: _____

I hereby certify that I am currently a member of the Boston Police Patrolmen's Association (BPPA) and I understand that if I transfer out of the BPPA, this deduction will be terminated by the Central Payroll Unit.

 Name (Printed)

 Date

 Name (Signature)

 Contact Number

This form must be filled out and sent to:
 Central Payroll Manager
 Auditing Department/Central Payroll
 Rm. M-4, Boston City Hall
 Boston, Ma 02201

or fax to:
 Central Payroll Manager
 Auditing Department/Central Payroll
 617-635-3967
 or email to:
Central.Payroll@cityofboston.gov