Get SMarT

SAVING MORE TOMORROW

Would you like to invest more for your retirement? Here's an easy solution!

- ☑ Do you find yourself thinking that you will save more next year when you have more money?
- ☑ Do you intend to save more, but just have not gotten around to it?
- ☑ Do you find yourself procrastinating when making financial decisions?

If you answered yes to any of these questions, an automatically increasing savings plan is right for you. This plan is called "Save More Tomorrow", or "SMarT" for short.

How does SMarT work?

By enrolling in the SMarT Plan, your pre-tax payroll deferral amount will automatically increase each year by the amount you specify (not to exceed the annual limit allowed by law). Most SMarT Plan participants schedule their deferral increases to occur at the same time as their annual pay raise.

Because the SMarT increase is likely to only represent a portion of your annual pay raise, your take-home pay should continue to increase. Each year, the additional deferral amount will be invested in the same manner as your investment allocation at the time of the increase.

How do I sign up for SMarT?

Just complete the form below and return it by fax or mail to Ohio Deferred Compensation.

Fax to: 614-791-0203

Mail to: **Ohio Deferred Compensation**
6085 Emerald Pkwy
Dublin, OH 43016-9900

What if I sign up, but later change my mind?

No problem! You can always change your SMarT increase amount or reset to your regular deferral amount by contacting the Program. You can re-enroll in SMarT later if you choose.

Questions?

If you have questions about the SMarT Plan, please contact the Program's Service Center toll-free at **1-877-644-6457**.

Investing involves market risk, including the possible loss of principal.

OHIO DEFERRED COMPENSATION

OHIO PUBLIC EMPLOYEES DEFERRED COMPENSATION PROGRAM

SMarT Plan Enrollment Form

☐ **YES**, I want to enroll in the SMarT plan and automatically increase my pre-tax payroll deferral amount each year by

☐ **$20** or ☐ **$**_____ per pay period on the first pay date of _____ _____.
Month Year

The increase will be invested in the same manner as your investment allocation at the time of the increase.

Printed Name _____ Last four digits of social security number _____

Employer Name _____

_____ _____
Signature (Required) Date

Ohio DC Use Only
DSP _____
Initials

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