



**I.B.E.W. Local 640 and  
Arizona Chapter N.E.C.A  
Defined Contribution Plan**



**Employee Deferral 401k  
Participant Information Sheet**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

D.O.B. \_\_\_\_\_

SSN # \_\_\_\_\_

CURRENT EMPLOYER \_\_\_\_\_

PAYROLL FREQUENCY \_\_\_\_\_

CONTRIBUTION     2%     4%     8%     10%     20%     30%

GENDER                        Male                        Female

MARITAL STATUS                Married                        Single

DATE OF HIRE \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**IMPORTANT:** Please remit a copy of this form to your current employer, retain a copy for yourself and email a copy to [dfwp@zenith-american.com](mailto:dfwp@zenith-american.com) or fax 602-248-8301 no later than the 15<sup>th</sup> day of the month when the deferral begins. If you do not have email capabilities, please ask the IBEW LU640 to send the document on your behalf. Proceed to the plan website ([www.principal.com](http://www.principal.com)) to complete the enrollment process and select your investment options. If you need assistance or have questions with the enrollment process, please contact the Principal Financial Group Contact Center at 1-800-547-7754. Your Principal contract number is 722864.

\* Please note these funds are not subject to reciprocity and an account will be established in this local.