## HRSA-ILA Annuity & Savings Plan New Enrollment

Account Number	SF 51506 - 1 - 1							
Participant's Name	<u></u>			<del> </del>				
Participant's Address	first	middle last						
	street							
	city	state		zip				
Social Security No.	_	Birth I	Date:	mo	/day	/		
Sex (optional):  Marital Status:	☐ Male ☐ Female ☐ Married ☐ Single		Legally Separated		Divorce	•	<i>y</i> 1	
TO BE COMPLETE	ED BY THE PLAN ADMINIS	TRATOR:	•					
Current Date: mo	day yr	(For	MassMutual: Current	Date equals	the entry	date.)		
INVESTMENT SE	LECTION (In 1% increment	ts only)						
(ENTER WHOLE PERC	ENTAGES; 1% MINIMUM IN INV	ESTMENTS	SELECTED; MULTIP	LES OF 1%	THEREA	AFTER)		
SE Cuamanta a	1	0/	MM C 2-D 500 I	dan End	(Nortes T		0/	
SF Guaranteed Prm Core Bon	% %	MM S&P 500 Index Fund (Nrtn Trust) Sel% Blue Chip Growth (T. Rowe Price) Sel Gr%						
RetireSMART	/0 %	Opps (Sands/JSP)						
RetireSMART	%	Prm OppenheimFds Sm Cp Opp II Sel Sel%						
RetireSMART	%	Wellington/OFI SmCpGr%						
RetireSMART	%	Sel Equity Opportunities Fund (TRP/Well)%						
Sel Black Roc	%	Sel Mid Cap Growth Fund (TRP/Frontier)%						
Sel Div Value	/0 %	Premier Global (OFI)%						
Small Cap Value	<sup>70</sup> %	MM MSCI EAFE Index (Nrtn Trust)%						
•	ebalance your investments on a quarte			,		•	70	
		, , , , , , , , , , , ,	1	. ,				
To get the most out of yo		.1-4- 41- D-6-	d C-1 A	41		4. 41		
	nuch you want to contribute and comp nd the bigger your nest egg can be at r		erred Salary Agreement	tne more y	ou contric	oute, the grea	iter your tax	
	nvestment needs and objectives based		, earnings and other reso	ources.				
with the money of other p	ove are a convenient, sensible way for participants to seek a common financi u should also keep a copy of this form	al goal. Afte	r receipt of this form, M					
Investment flexibility				SM				
	r investment selection by completing al.com/retire), which is available to y							
availability during period	s of high demand. You may change yeen investments daily at no charge.							
Please remember to choo	ose a beneficiary for your Annuity &	Savings Plan	n benefit.					
			/					
_				Dutt				
Please mail, email or fax	to: 1355 Terminal Blvd - Norfolk, V	A 23505						

Email: participant.services@hrsa-ila.com - Fax: (757) 423-1205

Form A&S-2