



NORTH SHORE BANK

The Bank of You

# NORTH SHORE BANK DEFERRED COMPENSATION PLAN AMENDMENT "In Plan Transfer"

Name  Social Security #

Address

City  State  Zip Code

Phone (H)(W)(C)

Email

Employer Name

**IN PLAN TRANSFER: I authorize the transfer of funds from:**

\_\_\_\_\_ to:

\_\_\_\_\_

**Model Portfolios\***

- N. Conservative \$
- O. Moderate \$
- P. Aggressive \$

**FDIC Insured Certificates**

- A. NSB Variable Rate \$
- B. NSB Blended Rate Term \_\_\_mo/year \$
- NSB Blended 5 years unless otherwise specified

**Mutual Funds\***

- C. BlackRock Equity Dividend \$
- D. TAP Stock Index \$
- E. Nicholas Fund \$
- F. TAP Large Core \$
- G. TAP Large Growth \$
- H. TAP Mid Value \$
- I. Nicholas II Fund \$
- J. Nicholas Limited Edition Fund \$
- K. Janus Triton R \$

- L. Federated Total Return Bond \$
- M. EuroPacificGrowthR3 \$
- S. MFS Mid Cap Growth R3 \$
- T. Nicholas Equity Income Fund \$
- U. American Fundamental Investors R-4 \$
- V. Heartland Value Plus \$
- Y. BlackRock LifePath \$
- (Circle one 2020, 2030, 2040, 2050)

\*All mutual fund investment options provided within this plan are: not insured by the FDIC or any other agency of the United States or the bank; are not deposits or other obligations of the institution and are not guaranteed by North Shore Bank; and are subject to investment risks, including loss of principal. Neither the EMPLOYER nor North Shore can provide any level of assurance that these funds will perform in a specific manner.

**EMPLOYEE Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

White – Employer

Yellow – NSB

Pink - Employee