

Instructions Please print using blue or black ink. You should use this form if you are enrolling in the plan for the first time. Keep a copy of this form for your records and submit the original to your Retirement Office. Attention Retirement Office: Please fax or mail completed form to Prudential

Questions?
Call 800-833-5761
for assistance

About You

Plan number Sub plan number
 0 0 6 9 1 9 0 0 1 9 4 5

Social Security number Daytime telephone number

First name MI Last name

Address

City State ZIP code

Date of birth Gender Original date employed
 _____ M F _____
month day year month day year

Date of rehire (if applicable) Marital status
 _____ Married Single, widowed or legally divorced
month day year

Investment Allocation Fill out Option I or Option II. Please complete only one.

(Please fill out Option I or Option II only. Do not fill out more than one section.)

By completing Option I you enroll in GoalMaker, Prudential's asset allocation program, and you direct Prudential to invest your contribution(s) according to a GoalMaker model portfolio that is based on your risk tolerance and time horizon. You also direct Prudential to automatically rebalance your account quarterly according to the model portfolio chosen. Enrollment in GoalMaker can be canceled at anytime.

Please refer to the Retirement Planning Guide for more information on rebalancing.

Options I or II must be completed accurately and received by Prudential before assets are accepted; otherwise, contributions will be placed in the default investment option selected by your plan. Upon receipt of your completed enrollment form, all future contributions will be allocated according to your investment selection. You must contact Prudential to transfer any existing funds from the default option.

Investment Allocations (continued)

Option I—Choose Goalmaker

Please invest my contributions according to the model portfolio selected below:

Time Horizon (years until retirement)	Goalmaker Model Portfolio (check one box only)		
	Conservative	Moderate	Aggressive
0 to 5 years	<input type="checkbox"/> C01	<input type="checkbox"/> M01	<input type="checkbox"/> R01
6 to 10 years	<input type="checkbox"/> C02	<input type="checkbox"/> M02	<input type="checkbox"/> R02
11 to 15 years	<input type="checkbox"/> C03	<input type="checkbox"/> M03	<input type="checkbox"/> R03
16 + years	<input type="checkbox"/> C04	<input type="checkbox"/> M04	<input type="checkbox"/> R04

OR

Option II—Design your own investment allocation

If you would like to design your own asset allocation instead of selecting GoalMaker, designate the percentage of your contribution to be invested in each of the available investment options. (Please use whole percentages. The column(s) must total 100%.)

I wish to allocate my contributions to the Plan as follows:

Percent Allocated	Codes	Investment Options
_____ %	TL	Tallahassee Guaranteed Income Account (TGIA)
_____ %	UL	PIMCO Total Return Bond Fund Adm
_____ %	H2	Prudential Asset Allocation Fund CL Z
_____ %	KU	Vanguard Institutional Index
_____ %	PZ	Davis NY Venture Fund Y
_____ %	UN	Dreyfus Premier Third Century Fund CL Z
_____ %	M3	Prudential Jennison Growth Fund CL Z
_____ %	BR	Goldman Sachs Mid Cap Value Fund Instl
_____ %	CN	Goldman Sachs Growth Opportunities Fund A
_____ %	S3	Allianz NFJ Small Cap Value A
_____ %	IB	Pioneer Oak Ridge Small Cap Growth Fund A
_____ %	JL	Oppenheimer Developing Markets Y
_____ %	PA	Prudential International Value Fund Z
<u>100</u> %		Total

Your Authorization

- I authorize my employer to reduce my compensation as directed in compliance with the terms of the plan.
- I choose not to participate in my employer sponsored retirement plan.

I understand the terms and conditions of the Program and agree to participate. I understand that upon enrollment, if my Plan allows, I will have telephone and/or internet privileges to perform transactions via Prudential's Interactive Voice Response service and Online Retirement Center

Signature _____

Date _____

SSN: _____