



SAVE TOGETHER

THE ALLIANCE 403(B) RETIREMENT PLAN

NEW EMPLOYER CHECKLIST

This checklist is for employers who wish to enroll their employees in the Alliance Retirement Plan. Click on each form to access it or visit alliancebenefits.org/forms.

FORMS TO COMPLETE

-  [Employer Retirement Plan Adoption Agreement](#)
-  [Employer Bank Authorization](#)
-  [Employer Monthly Contribution Report](#)
-  [Participant Enrollment](#) (one per employee)

PAPER FORMS

Any paper forms should be uploaded and submitted directly to Alliance Benefits.

-  Upload your paper forms by clicking [here](#).
-  Questions? Please call (800) 700-2651 or email retirement@cmalliance.org.



ALLIANCE
BENEFITS
Compassion, Integrity, Respect.