



# Enrollment Form

## 403(b)(1) Group Fixed Annuity Contract

## 403(b)(7) Custodial Account

## ING Retirement Choice

**ING Life Insurance and Annuity Company**  
 P.O. Box 990063  
 Hartford, CT 06199-0063  
 Tel: 1-800-584-6001  
 Fax: 1-800-643-8143

*In this form, ING Life Insurance and Annuity Company may also be referred to as the Company.*

### Information About You

*Please print.*

*Changes to the Social Security No. or Date of Birth must be initialed by the Participant.*

Plan Name <b>Saint Paul Public Schools</b>		Plan No. <b>VFZ212</b>	Location Code	
Participant Name (First, Middle Initial, Last)				Social Security No.
Participant Resident Address (No. & Street)				PO Box
City/Town			State	Zip Code
Email Address				
Date of Birth	Exp. Retire. Age	Date of Hire	Number of Dependents	<input type="checkbox"/> Male <input type="checkbox"/> Female
				Marital Status <input type="checkbox"/> M <input type="checkbox"/> S
Home Telephone No. ( )		Occupation/Job Title		Estimated Annual Income \$

### Financial Disclosure

*Please provide estimates.*

Annual Household Income				
<input type="checkbox"/> <\$25,000	<input type="checkbox"/> \$25,000 - \$49,999	<input type="checkbox"/> \$50,000 - \$99,999	<input type="checkbox"/> >\$100,000	
Net Worth (excluding primary residence)				
<input type="checkbox"/> <\$25,000	<input type="checkbox"/> \$25,000 - \$49,999	<input type="checkbox"/> \$50,000 - \$99,999	<input type="checkbox"/> \$100,000 - \$250,000	<input type="checkbox"/> >\$250,000
How would you categorize yourself as an investor?				
<input type="checkbox"/> Aggressive	<input type="checkbox"/> Moderately Aggressive	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderately Conservative	<input type="checkbox"/> Conservative
When will you begin using your retirement account?			Estimated percent of retirement income from this investment	
<input type="checkbox"/> >20 Yrs.	<input type="checkbox"/> >10 Yrs.	<input type="checkbox"/> >5 Yrs.	<input type="checkbox"/> <5 Yrs.	<input type="checkbox"/> <25% <input type="checkbox"/> 25 - 50% <input type="checkbox"/> 50 - 75% <input type="checkbox"/> >75%
Account Investment Objective(s) (Select between one and three)				
<input type="checkbox"/> Capital Preservation	<input type="checkbox"/> Income	<input type="checkbox"/> Growth & Income		
<input type="checkbox"/> Growth	<input type="checkbox"/> Aggressive Growth		<input type="checkbox"/> Speculative	

### Agent Note

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### Beneficiary(ies)

Primary	Contingent	Complete Legal Name	Relationship	%
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

### Replacement Information

Does the Participant have existing individual annuity contracts or individual life insurance policies?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will this Contract change or replace any existing Life Insurance or Annuity Contracts?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, provide carrier name and account number:		
Carrier _____	Account No. _____	

### Registered Representative Information

The following individual(s)/organization(s) will receive compensation from this Contract.			
Representative/Entity Name (Print)	Office Code	Rep. No.	% Participation

Investment Options	Participant Name (Last, First, Middle Initial,)	Social Security No.
<p><i>Investment Options are alphabetically grouped in their respective asset classes as determined by the Company under the 403(b)(1) Annuity Contract and the 403(b)(7) Custodial Account respectively.</i></p> <p><i>Changes to investment selections must be initialed by the Participant.</i></p> <p><i>Enter the percentage (in whole percentages) of your payment to be allocated to each investment option.</i></p> <p><i>The sum of the percentages from both columns must equal 100%.</i></p> <p><i>The Fixed Plus III Account is a fixed investment option available under a group annuity contract offered by the Company. All other investment options are mutual funds offered under a custodial agreement.</i></p>	<p align="center"><b>403 (b)(1) Annuity Contract</b></p> <p align="center"><b>Stability of Principal</b></p> <p>_____ % [697] ING Fixed Plus Account III</p>	<p align="center"><b>403 (b)(7) Custodial Account</b></p> <p><b>Bonds</b></p> <p>_____ % [497] ING Intermediate Bond Fund - Class A</p> <p>_____ % [1003] The Bond Fund of America<sup>SM</sup> - Class R-4</p> <p><b>Asset Allocation</b></p> <p>_____ % [747] ING Solution 2015 Portfolio - Service Class</p> <p>_____ % [759] ING Solution 2025 Portfolio - Service Class</p> <p>_____ % [762] ING Solution 2035 Portfolio - Service Class</p> <p>_____ % [765] ING Solution 2045 Portfolio - Service Class</p> <p>_____ % [768] ING Solution Income Portfolio - Service Class</p> <p><b>Balanced</b></p> <p>_____ % [788] ING T. Rowe Price Capital Appreciation Port - Serv Class</p> <p>_____ % [193] Pax World Balanced Fund</p> <p><b>Large Cap Value</b></p> <p>_____ % [1208] Fundamental Investors<sup>SM</sup> - Class R-4</p> <p>_____ % [829] ING Stock Index Portfolio - Institutional Class</p> <p>_____ % [789] ING Van Kampen Growth and Income Portfolio - Service Class</p> <p>_____ % [1377] RiverSource Diversified Equity Income Fund - Class R4</p> <p><b>Large Cap Growth</b></p> <p>_____ % [1307] ING Janus Contrarian Portfolio - Service Class</p> <p>_____ % [251] ING T. Rowe Price Growth Equity Portfolio - Service Class</p> <p>_____ % [572] The Growth Fund of America<sup>®</sup> - Class R-4</p> <p><b>Small/Mid/Specialty</b></p> <p>_____ % [457] CRM Mid Cap Value Fund - Investor Shares</p> <p>_____ % [440] ING American Century Small-Mid Cap Value Portfolio - Service Class</p> <p>_____ % [436] ING Baron Small Cap Growth Portfolio - Service Class</p> <p>_____ % [2040] ING Global Resources Portfolio - Service Class</p> <p>_____ % [435] ING JPMorgan Mid Cap Value Portfolio - Service Class</p> <p>_____ % [752] ING JPMorgan Small Cap Core Equity Portfolio - Service Class</p> <p>_____ % [1019] ING Van Kampen Real Estate Portfolio - Service Class</p> <p>_____ % [1023] Morgan Stanley Mid Cap Growth Portfolio - Adviser Class</p> <p><b>Global/International</b></p> <p>_____ % [1004] Capital World Growth and Income Fund<sup>SM</sup> - Class R-4</p> <p>_____ % [573] EuroPacific Growth Fund<sup>®</sup> - Class R-4</p>
	<p><b>Total must equal 100%</b></p>	

<b>Anti-Fraud Statement</b>	Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud and may be subject to fines and confinement in prison.
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<b>Participant Certification</b>	<p>I acknowledge receipt of the current participant information booklet, as well as current prospectuses or investment option summaries for all available investment options under the Plan.</p> <p>I understand the Internal Revenue Code restrictions on withdrawals from a 403(b)(1) tax-deferred annuity and a 403(b)(7) custodial account (described in the "Special Rules for Certain Plans" section of the ING Retirement Choice Participant Information Booklet). I understand that these restrictions do not apply to transfers to other investment alternatives under my employer's 403(b) plan or to another 403(b)(1) annuity contract or a 403(b)(7) custodial account as permitted by Revenue Ruling 90-24. However, if I transfer 403(b)(7) assets to investment alternatives under a 403(b)(1) annuity contract, the 403(b)(7) restrictions will continue to apply to withdrawals from that contract.</p> <p>I understand that my employer has selected a program that includes an annuity to fund a tax-deferred arrangement; that the tax laws provide for deferral of taxation on earnings on account balances; and that, although the annuity provides features and benefits that may be of value, it does not provide any additional deferral of taxation beyond that provided by the tax-deferred arrangement itself.</p> <p><b>I further acknowledge that under ING Retirement Choice, there is an annual administrative fee of 0.20% for each of the investment options in the Plan excluding the ING Fixed Plus Account III. These administrative fees will be deducted on a quarterly basis.</b></p> <p><b>In order to receive the April 11, 2008 first payroll deduction into the new 403(b) Plan, please be sure to complete your Enrollment Form and Salary Reduction Agreement by 3/31/2008. Please turn both forms into one of the ING/Capital Street Representatives. A representative can be reached by calling 651-665-4300.</b></p> <p>By signing this form, I acknowledge that the pre-filled information, if applicable, as well as the information I have provided, is complete and accurate. I further certify that the Company is entitled to rely exclusively on information provided on this form.</p>
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<b>Participant's Authorized Signature</b>	Participant's Signature	City and State Where Signed	Date (mm/dd/yyyy)
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<b>Registered Representative's Certification and Signature</b>	<p>Does the participant have an existing Annuity or Life Insurance Contract? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "yes", a replacement form must be completed <u>only</u> for 403(b) plans where ING is not the exclusive provider.)</p> <p>Do you have any reason to believe any existing Life Insurance or Annuity Contracts will be modified or replaced if this Contract is issued? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>I certify that the information on this form is true, complete and accurate to the best of my knowledge.</p>
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Registered Representative ( <i>print name</i> )	
Registered Representative's Signature	Date (mm/dd/yyyy)