

Voluntary Separation Offer
Huizenga College of Business and Entrepreneurship

EXHIBIT D

VSO Payment Election Form

NAME: _____ NSU ID: _____

I elect to receive my VSO Separation Allowance and Medical Insurance Allowance payments as follows (select one):

_____ single lump sum payment distributed on July 6, 2018

-or-

_____ four installment payments paid on the following dates:

- a. July 6, 2018
- b. January 18, 2019
- c. July 19, 2019
- d. January 17, 2020

NOTE: Both the Separation Allowance and Medical Insurance Allowance must be paid together pursuant to your selected payment distribution schedule. All payments are subject to withholdings for Federal, State, Local and FICA taxes which will be withheld at the applicable supplemental flat rate.

SIGNED: _____

DATE: _____