



APT ADVANCED POLYMER TECHNOLOGY
CORP. 401(K) PS PLAN

PAYROLL AUTHORIZATION FORM

Division (if applicable): _____

Name of Employee (First, Middle, Last) _____

Social Security Number _____

Address _____

Date of Birth _____

City, State, ZIP Code _____

Date of Hire _____

SECTION 1 - SALARY DEFERRAL ELECTION

I hereby elect to participate in the above-referenced plan. I have received written information on the plan, and I understand the general requirements including the pre-tax salary deferral election. I understand that, unless I later amend it, the following election will apply automatically to all future deferrals.

- I elect the following pre-tax salary deferral: _____% per pay period.
I elect the following Roth salary deferral: _____% per pay period.
I elect to have none of my salary deferred into the plan at this time.

NOTE: The Employer reserves the right to reduce a participant's salary deferral percentage if necessary to ensure the plan's compliance with the Internal Revenue Code.

SECTION 2 - INVESTMENT ELECTION

I have received and read the information supplied for each fund selected, and have made a decision regarding my investment selections based on their suitability to my needs and my financial situation. I have logged onto www.newportgroup.com ("the website") to input these investment elections online or called the toll-free number, 888-401-5629. If I fail to make investment elections, I understand that any contribution allocated to my account will be deposited into the plan's default investment fund. Once contributions are deposited, I may transfer into a different set of funds by logging onto the website or by calling the toll-free number, 888-401-5629.

SECTION 3 - CERTIFICATION

Participant's Signature _____

Date _____