

**PARTICIPANT DISTRIBUTION ELECTION FORM
(VESTED ACCOUNT BALANCE DOES NOT EXCEED \$5,000)**

Participant: _____

Employer: _____

Date separated from service: _____

1. Election. After reading the SPECIAL TAX NOTICE REGARDING PLAN PAYMENTS, I, the undersigned Participant, make the following distribution election: (Choose a., b. or c.)

- a. () A direct rollover of my entire vested account balance to the IRA or to the retirement plan of another employer designated in 2. below.
- b. () A direct rollover of the following portion of my vested account balance to the IRA or to the retirement plan of another employer designated in 2. below: \$_____ (not less than \$500), with the balance paid in lump-sum, less income tax withholding. Note: If your vested account balance is less than \$500, you cannot choose b.
- c. () A lump-sum payment of my entire vested account balance, less any income tax withholding.

2. Information for Direct Rollover. If 1.a. or b. is selected above, complete the following:

I represent that the IRA or retirement plan of another employer designated below is a proper recipient for a direct rollover.

Name of IRA or retirement plan & account number:

Name of trustee(s), custodian(s) or insurer: _____

Address to send direct rollover: _____

3. Distribution Charge. I understand the Plan may charge a reasonable fee for the processing of the distribution.

4. Waiver of minimum notice period. I consent to an immediate distribution of my vested account balance. I affirmatively waive any unexpired portion of the minimum 30-day notice period during which I may consent to a distribution from the Plan.

EXECUTED this _____ day of _____, 20_____.

Print Name of Participant

Signature of Participant

Street Address (include apartment no.)

Social Security Number

&

Date of Birth

City State Zip Code

Please review the 'Special Tax Notice' before completing this form. If you do not have a copy of this notice, it can be obtained at www.retireplansolutions.com. Please submit the completed distribution form to: Retirement Plan Solutions, P.O. Box 250, Tipton, PA 16684 or fax to (814)684-4510 for processing. You may reach Retirement Plan Solutions by phone if needed at 814-684-2255.