

How to Complete the Rollover Form

When to use this form: This form is used to invest prior plan money into your current retirement plan. Generally, you can roll over assets from these types of plans: Qualified Plans (Including 401(k) Plans), SIMPLE IRAs in existence for at least 2 years, Conduit and Traditional IRAs (taxable non-Roth distributions only), 457(b) plans, and 403(b) tax sheltered annuity contracts.

Please note: if available, your existing Investment Allocations will be used. Otherwise monies will be invested in the Plan's Default Fund.

STEP 1 Contact your prior employer plan administrator or IRA provider to request a rollover distribution. You can locate your prior plan provider or IRA provider's contact information on a recent account statement or by calling your prior employer HR.

STEP 2 Request a certified or bank check for your rollover mailed to your home address.

The check should be payable to

Include the last 4 digits of your Social Security number and Plan number

on the check.

STEP 3 Gather Required Rollover Documentation

All rollovers must be from an eligible retirement plan source. Attach one of the following in support of this:

- · Statement of distribution
- · Most recent account statement

Once you have your rollover check, complete the remaining steps and submit for processing.

STEP 4 PARTICIPANT INFORMATION

Complete all the requested information in this section.

STEP 5 ROLLOVER SOURCE

- Choose one rollover distribution source: Prior Employer Plan or Individual Retirement Account (IRA)
 (indicate the type of plan).
- When making a Qualified plan rollover, indicate whether it is related or unrelated to the current plan: (Most rollovers are not related.)
 - No-Unrelated rollover is from a previous employer plan.
 - Yes-Related rollover is from another plan of your current employer plan.

Note: If you do not check a box, we will understand you have certified that the rollover is from an unrelated employer.

STEP 6 ROLLOVER TYPE AND AMOUNT

- · Select the type of money you want to roll into the plan.
- For Roth 401(k) rollover amounts: complete the Contribution + Earnings = Total amount section. Please refer to the distribution statement provided by prior 401(k) provider for this information.
- Indicate the year your Roth 401(k) contributions began. This year allows ADP to track your contribution for taxation purposes.
- All information is required to complete your rollover.
- If you wish to roll over a loan offset from a prior plan, please obtain a Rollover Form with Loan Offset by calling 1-800-695-7526.

STEP 7 PARTICIPANT SIGNATURES AND ACKNOWLEDGMENT

- Read the Acknowledgment, sign and date the form at the bottom (participant signature).
- The check should be payable to

Include the last 4 digits of your Social Security number and Plan number documentation to the signed form and send to:

on the check. Attach the rollover check and

Overnight Mail: ADP C/O FIS Attention: Lockbox 13399 Lockbox Dept. Suite E

100 Grove Road West Deptford, NJ 08066 Regular Mail: ADP NJ CRS P.O. Box 13399 Newark, NJ 07101-3399

Incomplete forms or forms submitted without financial deposits/checks will be returned. If you need assistance or have any questions, please call 1-800-695-7526.



Recordkeeping Plan #



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Employee Name (Last)		(First)	(Middle Initial)
Address (Street)		(Apt. #	:/ PO Box#)
(City)		(State)	_ (Zip Code)
Birth Date (Month/Date/Year)		Hire Date (Month/Date/Year) _	
Email Address		Phone)
	How to Make the	he Check Payable:	
preprinted certified or bank check ast 4 digits of your Social Security N		stated dollar amount. Personal check on the check made payable to:	s will be returned. Please include the
ROLLOVER SOURCE			
his rollover is a distribution from or Prior Employer Plan	ne of the following eligible rollover s Individual Retirement A	sources: (Select one type of plan or a ccount (IRA)	eccount.)
Qualified Plan, is this rollover from	า a related employer? (Most rollove	rs are from plans maintained by an $\it u$	nrelated employer.)
■ No Unrelated	Yes Related		
lote: If you do not check a box,	we will understand you have cer	tified that the rollover is from an u	nrelated employer.
ROLLOVER TYPE AND	AMOUNT		
ROLLOVER TIPE AND	AMOUNT		
elect rollover type:			
☐ Before-Tax: \$To			
		(Earnings) = \$	Total Roth Amount
		ar this rollover contribution is received) 20	
listribution statement provided b	y your prior 401(k) provider for t	his information.	ver from an IRA. Please refer to the
PARTICIPANT ACKNOW	LEDGMENT, ROLLOVER IN	IVESTMENT DIRECTION AND	SIGNATURE
		Plan provisions, received the Fee Disc ctives, risks, expenses and charges. B	
nderstand the fund prospectuses/de I am rolling over these funds	escriptions, including the funds' object within 60 days of the date I received	ctives, risks, expenses and charges. B them from an eligible employer plan o	y signing this form, I certify that: r IRA (not applicable to direct rollovers)
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