

## Cash Distribution Instructions

You can type on the form when you open it up on your desktop.

You only need to complete pages 1-5 ONLY

1) Employer Name: **Town of Wellesley**

Plan # **VFG678**

2) Fill in your info

3) Check the **"Withdraw 100% of my account"** box, and under **"Employee"** fill in **"100%"**

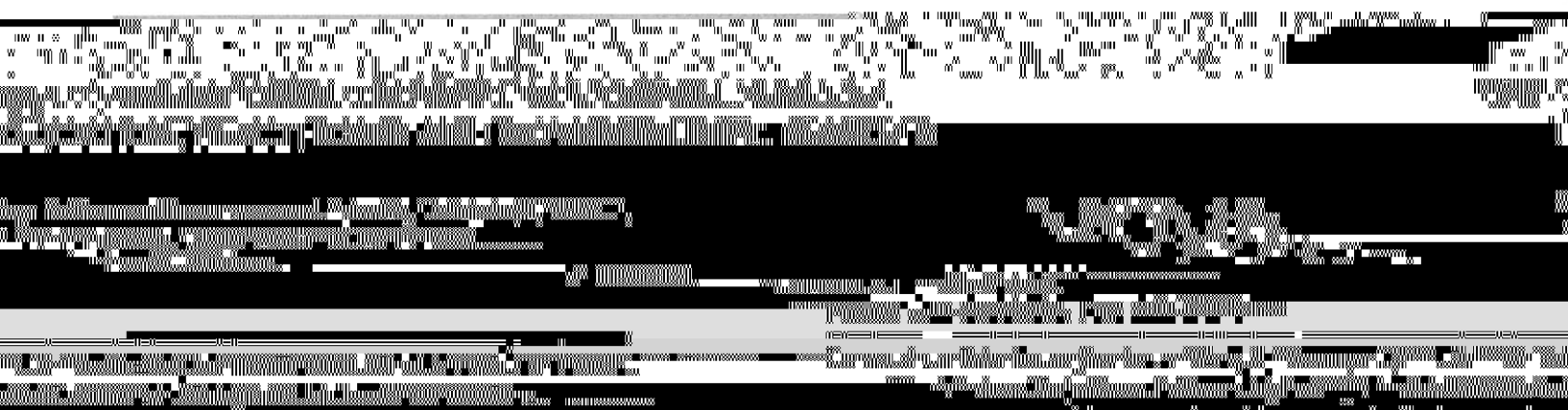
4) Check first box down: **"Cash distribution paid directly to you"**

5) Skip

6) Skip

7) Tax Withholdings:

Fill in if you want extra money withheld.



...draw assets by a... 401, 403(b) or Governmental 457(b), 457(a), 457(b) or 457(c) of other non-qualified... This fund does not have a... term cad...

...day, Monday through Friday, that the NYSE is open.

...All withdrawal requests... withdrawal request is placed...

...All withdrawal requests... withdrawal request is placed...

...All withdrawal requests... withdrawal request is placed...

...All withdrawal requests... withdrawal request is placed...

...All withdrawal requests... withdrawal request is placed...

...All withdrawal requests... withdrawal request is placed...

EDUCATION, HEALTH CARE AND ZEPHYRUS

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**4. WITHDRAWAL ELECTIONS FOR NON ROTH ACCOUNTS**

Letter of Acceptance is required unless (1) distribution is payable to Account Holder, (2) request is signed by Employer, or (3) by special contract between the Company and the Employer

- Cash distribution paid directly to you
- Rollover to Voya Traditional IRA/Qualified plan
- Rollover to Voya Roth IRA

**C. OUTSTANDING LOAN INFORMATION**

- I wish to continue making repayments to my loan by maintaining the minimum cash value in my account to keep the loan active.  
*(Only if allowed by the provisions of the Plan document.)*
- I no longer will be making repayments to my loan. I understand that if I elect this option my outstanding loan balance will be considered taxable.

If no action of the account is rendered and no election is made, it is our understanding that you deemed to have elected the

**8. DELIVERY OPTIONS FOR CASH DISTRIBUTIONS**

- Withdrawal will be deposited directly into my bank account. *(Complete the bank information below.)*
- Withdrawal check will be mailed to me through regular U.S. Mail.

~~If you decide to have a withdrawal deposited directly into your bank account you need to complete the information below, and by doing~~

**11. FOR ADVISOR USE ONLY**

For assistance related to this transaction request, please contact:

Name \_\_\_\_\_ E-mail Address \_\_\_\_\_  
Phone \_\_\_\_\_

**12. THIRD PARTY ADMINISTRATOR AUTHORIZED SIGNATURE AND CERTIFICATION**

This section must be completed if required by the Employer.

I am employed as a Third Party Administrator of the Plan identified above and certify the following:

- I have read and agree to the terms of the requested withdrawal;
- I have verified the Account Holder's eligibility for such withdrawal and have not relied solely on information provided by the

Account Holder in this form in order to make this determination;

- The requested benefits are permitted in accordance with the terms of the Plan document; and
- The information provided in this document is complete and accurate to the best of my knowledge. If any information provided by the Account Holder to the Company is in conflict with the information provided by me to the Company, I acknowledge that the Company will rely conclusively on the information provided by me.

**Third Party Administrator (TPA) FEE (To be completed by TPA if applicable. Check will be made payable and mailed to the TPA.)**

TPA Fee Amount \$ \_\_\_\_\_

From Account Holder Account      Account Type (example: deferral, match, etc.) \_\_\_\_\_

From Forfeiture Account      Account Type (example: deferral, match, etc.) \_\_\_\_\_

The Third Party Administrator for the Plan identified above has recorded this withdrawal in their records for this plan.

Name of TPA Firm \_\_\_\_\_

Authorized Signer Name (Please print.) \_\_\_\_\_

Signature \_\_\_\_\_ Date (mm/dd/yyyy) \_\_\_\_\_

**13. EMPLOYER, PLAN SPONSOR OR NAMED FIDUCIARY AUTHORIZED SIGNATURE AND CERTIFICATION**

If this section is not signed, your participant will not receive their distribution.