

Regional Conference Retirement Plan

Retirement Allowance

Election of Method of Payment Under The Regional Conference Retirement Plan

I hereby elect the following method(s) of payment for my distribution(s) from the Regional Conference Retirement Plan—a qualified church defined benefit plan as described by the IRS to be a 401(a) plan:

① () **DIRECT ROLLOVER of (select one):**

() **ALL** of my Plan Distribution

() \$ _____ of my Plan distribution (**\$500 or more**), the balance to be paid directly to me.

Check (✓) Type of Plan: _____ **TSA** _____ **IRA** _____ **OTHER** _____
(Indicate Type of Plan)

Name of Plan:

Account Number:

**Name and Address of
Trustee or Custodian:**

REQUIRED FOR ALL ROLLOVERS: One of the following **MUST** be provided with the RA Form (check appropriate box):

Name of Contact Person or Department where check is to be sent: _____
Telephone Number of Contact Person or Department: () _____

A form from the TSA, IRA or Other Plan where Retirement Allowance is to be sent that includes account information for that institution (form to be mailed with RA check).

I represent that the above-named eligible retirement plan is an individual retirement account or individual retirement annuity established in my name, or a qualified defined contribution retirement plan or annuity plan which accepts direct rollovers.

② () **PAYMENT TO ME of (select one):**

() **ALL** of my Plan Distribution

() \$ _____ of my Plan distribution (**\$500 or more**), the balance to be rolled over to the above account.

I acknowledge that all amounts paid to me from the Plan, and NOT paid in a direct rollover, are subject to MANDATORY 20% WITHHOLDING for Federal Income Tax.

Name:
(Please type or print)

Signature: _____ **Date :** _____

NOTE:
Above signature is for ① AND ② above—the Lump Sum will be paid according to the (✓)

NOTE: →
If you elect a direct roll-over, **this entire gray area MUST** be completed. Your direct roll-over check will be issued with the information **YOU** provide here!!!