

Participant Information

First Name	MI	Last Name	Date of Birth
SSN (Provide last 4 digits)	E-mail Address (To receive status updates)		Phone
Address	City	State	Zip

Participant Instructions

- Obtain loan payoff amount and date of last loan repayment payroll deduction by contacting Participant Services at 888.333.6315, by e-mail at distributions@savetoretire.com or by fax at 800.948.4059.
 - Complete this form using the payoff amount and date of last payroll deduction provided by C&N.
 - If you intend to request a new loan after this loan payoff, you will need to complete a Loan Request Packet and include it with this completed form.
- Important Information:** The highest outstanding loan balance within the previous 12-month period is considered in determining the amount available for a new loan. The loan being paid off may affect the amount available for a new loan due to this requirement.
- Submit loan payoff check, this completed form, and new loan request packet (if applicable) to your HR Department.
- Note:** This is a time sensitive process and loan payoff amount must be deposited immediately upon obtaining the loan payoff amount.

Plan / Employer Information

Plan Name	Employer Name
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Plan Administrator Instruction

- Stop payroll loan repayment deductions upon receipt of this form and participant's loan payoff check.
- Mail participant's check to the custodian as directed on page 2 or deposit into the bank account used for plan contribution funding and notify C&N to pull the loan payoff amount directly from the account.

Payoff Loan Details

Current loan (If you have only one outstanding loan, check this box.)

Specific Loan Number (If you have more than one outstanding loan, enter applicable loan number here.) _____

Payoff Amount: \$ _____ (This is the amount provided by C&N.)

Date of Last Payroll Deduction: _____

Payoff Method

Give check to Plan Sponsor for deposit - Plan Sponsor should **NOT** include loan payoff amount in payroll upload - Amount should be deposited to the bank account used for plan contribution funding and C&N must be notified to pull the loan payoff amount directly from the account.

Mail check directly to Custodian

<p>Regular Mail: Matrix Trust (DEN) Attn: TPA 000290 P.O. Box 3595 New York, NY 10008-3595</p>	<p>Overnight/Special Delivery: JPMorgan Chase - Lockbox Processing Attn: Matrix Trust (DEN) - Lockbox 3595 4 Chase Metrotech Center 7th Floor East Brooklyn, NY 11245</p>
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Make check payable to: Matrix Trust Company
 Include on memo line: TPA 000290, Plan Name, Participant Name

Make check payable to: Matrix Trust Company
 Include on memo line: TPA 000290, Plan Name, Participant Name

Employee / Participant Signature

Participant's Signature

Date

Employer / Plan Administrator Signature

Employer's Signature

Date

Return the completed and signed form to the e-mail address or fax number below.
If you have any questions, contact us **Monday - Friday, 8:00 a.m. to 7:30 p.m. EST**

Participant Services	E-mail Address	Fax Number
888.333.6315	distributions@savetoretire.com	800.948.4059