

Correct Participant(s) Social Security Number
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Plan Information

Plan Name:

Plan Number:

Participant Information

Participant Name:

Incorrect/Original SSN:

Correct/Revised SSN:

Instruction and Authorization

I have determined that the changes indicated on this form are necessary because the SSN or TIN on the Service Provider's system does not match the Participant's actual SSN or TIN as indicated on the applicable government issued documentation.
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I have reviewed and understand the Instruction and Information section attached to this form and I am authorized on behalf of the Plan to instruct the Service Provider to request this correction.

Plan Representative's Name:

Plan Representative's Title:

Plan Representative's Signature:

Date:

Plan Representative's Phone Number:

Plan Representative's Fax Number:

<p align="center">Instruction and Information Attachment Correct Participant(s) Social Security Number</p>
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<p align="center">When to Use this Form</p> <p>If you believe a correction is required because of a recordkeeping error made by the Service Provider, please contact your Plan Representative for assistance. Otherwise, please complete the appropriate correction form.</p> <p>The Social Security Number (SSN) or Taxpayer Identification Number (TIN) on the participant's account is incorrect.</p>

<p align="center">Correction Highlights</p> <p>Due to risk of identity theft, precautions must be taken when changing a SSN or TIN.</p> <p>It is the Plan's responsibility to ensure that the Service Provider has the correct SSN or TIN for each participant. Therefore, the Plan must review the original government issued documentation that supports the requested change.</p> <p>Before submitting this form, you may want to discuss with your ERISA consultant.</p>

Investment Option Selection for Future Remittances	
Any transfers between investment options of existing balances must be made separately.	
Example #1	
Before Correction	
<u>Incorrect SSN – Account #1</u> Existing Balance: \$100 Default Fund Investment Option Selection for Future Remittances: 100% Default Fund	<u>Correct SSN – Account #2</u> Existing Balance: \$200 ABC Fund Investment Option Selection for Future Remittances: 100% ABC Fund
After Correction	
<u>Incorrect SSN – Account #1</u> Existing Balance: \$0 Investment Option Selection for Future Remittances: NA	<u>Correct SSN – Account #2</u> Existing Balances: \$100 Default Fund, \$200 ABC Fund Investment Option Selection for Future Remittances: 100% ABC Fund
Example #2	
Before Correction	
<u>Incorrect SSN – Account #1</u> Existing Balances: \$50 Default Fund Investment Option Selection for Future Remittances: 100% ABC Fund	<u>Correct SSN – Account #2</u> Existing Balance: \$50 Default Fund Investment Option Selection for Future Remittances: 100% Default Fund
After Correction	
<u>Incorrect SSN – Account #1</u> Existing Balance: \$0 Investment Option Selection for Future	<u>Correct SSN – Account #2</u> Existing Balance: \$100 Default Fund Investment Option Selection for Future

Return Via E-Mail or Fax To: 1-866-569-5056
Attention: Account Manager

Remittances: NA	Remittances: 100% Default Fund
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