<b>Reconcile Participant Loan Recon</b>	ds between Service Provider and Plan
Sponsor	

Plan Information	
Plan Name:	
Plan Number:	

Participant Information		
Participant Name:	Participant SSN or ID:	
Loan Number:		

Instruction and Authorization		
I have reviewed and understand the Instructions and Information section		
attached to this form and I am authorized 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:	

## Instruction and Information Attachment Reconcile Participant Loan Records between Service Provider and Plan Sponsor

## When to Use this Form

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.

The participant account reflects an outstanding loan balance, but your records indicate the loan is paid in full and/or loan repayments were misapplied by a Prior Service Provider.

## **Correction Highlights**

These instructions do not act as authorization to remove a participant loan from default status. If the loan is currently in Default, a Letter of Instruction to Reverse the Loan Default must be received before the loan may be reclassified as Paid in Full. Please contact your Plan Representative for complete details.

Outstanding loan balance will be reclassified as Paid in Full without tax reporting the loan balance to the participant.

Before submitting this form, you may want to discuss with your ERISA consultant.