



403(b) / 457(b) Transaction Routing Form

DATE STAMP

Return this completed form to:

Mail: Envoy Plan Services c/o MidAmerica

402 South Kentucky Ave., Suite 500, Lakeland, FL 33801

Email: 403btransactions@myMidAmerica.com | **Phone:** (800) 248-8858 | **Fax:** (877) 513-2272

Your Information – To facilitate your request, this form must accompany any contract exchange, rollover, distribution, or loan request paperwork provided by your 403(b) or 457(b) investment provider. I am returning additional information for a previously submitted request.

Employer: [Grid]

Name of Participant: [Grid]

Current Mailing Address: [Grid] Social Security #: [Grid]

City, State, Zip: [Grid] Date of Birth: [Grid]

Email: [Grid] Daytime Phone: [Grid] Evening Phone: [Grid]

Agent Name: [Grid] Agent Phone: [Grid]

Transaction Information – Please select transaction type.

1. **Contract Exchange** | You must be employed with the employer listed above and the receiving investment provider must be approved on your employer's 403(b) / 457(b) plan.
 I am transferring my 403(b) account from _____ to _____.
(Current Investment Provider) (New Investment Provider)
 I am transferring my 457(b) account from _____ to _____.
(Current Investment Provider) (New Investment Provider)

2. **Loan Request** | Loans must be permitted on your employer's 403(b) / 457(b) plan and by your investment provider. The investment provider must be approved on your employer's 403(b) / 457(b) plan.
Account Type: 403(b) 457(b) Investment Provider: _____
Loan Amount Requested: \$ _____ Repayment Time: _____ Years
Do you currently have any outstanding 403(b) or 457(b) loans? Yes No If yes, provide names of investment providers for each loan.
Loan 1: _____ Loan 2: _____
Have you ever defaulted on a 403(b) or 457(b) loan? Yes No If yes, you are no longer eligible to take a loan.

3. **Distribution Request** | Indicate distribution type below.
Account Type: 403(b) 457(b) Investment Provider: _____
 Financial Hardship (403b) / Unforeseen Emergency (457b) – Substantiation documentation must accompany this request for approval.
 Required Minimum Distribution (RMD)
 Qualified Domestic Relations Order (QDRO)
 Disability – Must be eligible to collect a pension from the state to qualify.
 Purchase Service Credit from my State Retirement System
 Cash Distribution or Rollover – Select additional details below.
 Separation from service – Date of Separation: _____
 Age 59 ½ (for 403(b) Plans Only) - Date of Birth: _____
 Age 70 ½ (for 457(b) Plans Only) - Date of Birth: _____

4. **Plan-to-Plan Transfer**
 I am transferring my 403(b) account from _____ to _____.
(Employer Plan Name) (Employer Plan Name)
 I am transferring my 457(b) account from _____ to _____.
(Employer Plan Name) (Employer Plan Name)

Acknowledgement and Authorization

Please forward all paperwork regarding this transaction to:
 According to instructions on investment provider forms
 Special Instructions – Attn: _____ **Address:** _____ **Fax:** _____
Employee Signature _____ Date _____

Transaction Request Form Instructions

- All transaction requests must be submitted to Envoy Plan Services for review and certification on behalf of your Employer.
- A Transaction Request Form must be completed and accompany all transaction requests submitted to Envoy Plan Services.
- The Transaction Request Form is located on the Envoy Plan Services website at www.envoyplanservices.com.
- Transaction requests include:
 - Loans
 - Distributions
 - Separation from service
 - Age 59 ½
 - Required minimum distribution (RMD)
 - Rollovers
 - 403(b) Hardship Withdrawals
 - 457(b) Unforeseen Emergency
 - Contract Exchanges
 - Transfers
 - Qualified Domestic Relations Order (QDRO)
- Transaction Requests can take from 3 to 5 working days to go through the review and certification process. In many circumstances, information must be requested and received from multiple outside entities, i.e. your Employer, any and all of the previous providers you have contributed to. Or, we may need to obtain additional information directly from you.
- All transaction requests should include the Transaction Request Form AND all of the paperwork you have completed for your 403(b) or 457(b) provider. Please do not send only the signature page. We need to see all of the paperwork in order to make a proper evaluation of your request.

