

Spousal Consent

If your distribution exceeds \$5,000.00, you must complete the attached Spousal Consent form. If you are married, your spouse must consent to your lump sum distribution by signing this form. If you are not married, check the appropriate box and sign where indicated. *Please note that this spousal consent must be notarized and returned to your employer.*

Your distribution will be delayed if this form is not properly completed.

I hereby approve of and consent to the payment option elected by my spouse. I understand that under the terms of the Plan, benefits in excess of \$5,000.00 may have to be paid in the form of a joint and 50% survivor annuity unless I consent to a different form of payment. I also understand that the effect of my consent may be to have retirement benefits under the Plan paid in a different form or to a beneficiary other than myself. I further understand that my spouse may not change the Primary Beneficiary designation without first obtaining my written consent.

_____ Name of Spouse	_____ Signature of Spouse
_____ Signature of Notary Public	_____ Date

Participant's Certification, if No Spouse

- [] I hereby certify that I am not now married and that there are no Plan benefits payable to a former spouse under a qualified domestic relations order.

- [] I hereby certify that I am not now married, however, there may be a reduction in my benefits as a result of a qualified domestic relations order.

_____ Signature of Notary Public	_____ Signature of Participant
_____ Date	