



Personal Information

Plan Number: 004989000
Name:
Date of Birth: SSN: Date of Hire:
Street Address:
City: State: ZIP:
Home Phone: Work Phone: Department:
Email:

Paperless Communication: By providing your email address, you are consenting to receive electronic communications as it relates only to this form and related to this distribution request unless otherwise elected below.

I wish to be contacted via the telephone number provided above. I wish to be contacted via US mail.

Rollover/Transfer Funds From

- 401(a) Governmental, 403(b) Governmental, 401(k) Governmental, Roth 401(k), Roth 457(b), 401(a) Qualified/Non-Governmental, 403(b) Qualified/Non-Governmental, 401(k) Qualified/Non-Governmental, Roth 403(b), Traditional IRA, 401(a) Drop, 457(b) Governmental, Deemed Traditional IRA, Deemed Roth IRA, TSP (Thrift Savings Plan)

Carrier/Custodian Name: Account Number:
Contact Name: Contact Phone:
Street Address:
City: State: ZIP:

Rollover/Transfer Funds To

Plan Name: Plan Type:

Amount to Rollover/Transfer:

- Partial Dollar Amount \$
Total Account Balance* \$
*Please approximate your account balance for tracking purposes.

Are you rolling over Roth assets? Yes No

If yes, what is the Roth Basis (total contributions without earnings): \$

What is the year of your first Roth Contribution:

Does the Rollover/Transfer include after-tax assets that are not subject to Roth distribution rules? Yes No

If Yes, provide, After-Tax Basis Amount: \$ (total contributions without earnings)

Make check payable to:
Nationwide
FBO (Participant Name, SSN, Acct#)

Mailing Address: Nationwide Retirement Solutions
PO Box 183150
Columbus, OH 43218

457(b) to 457(b) Incoming Assets (only complete if moving one 457(b) account to another 457(b) account)

Some 457(b) Plan documents allow participants who leave one employer and accept a position with a new employer, the option to TRANSFER or ROLLOVER the assets from the first employer. The choice of transfer or rollover will determine when the assets are available for distribution from your NRS account.

I have severed from employment from my previous employer on _____(date).

The difference between a transfer and rollover:

- Following a Transfer, withdrawal of assets is permitted only when the account holder experiences a distributable event. (e.g. Severance of employment or age 70½ (or age 72 if born after June 30, 1949))
- Following a Rollover, withdrawal of assets is permitted at any time pursuant to the account holder's request.

Please make your selection: TRANSFER ROLLOVER

Investment Direction to Nationwide

Allocate my rollover/transfer according to the current allocation on file

NOTE: If you do not indicate your allocation choices, your rollover will be credited to your current allocation. Additionally, if you select an investment option that is closed, your rollover/transfer will be credited to the Nationwide Money Market Fund.

OR Allocate my rollover/transfer as listed below:

Investment Option	Percent
Must total	100%

Authorization

By signing below, I understand that my Rollover/Transfer will become subject to the terms and conditions of the plan. I certify that I satisfy the requirements for making this Rollover/Transfer and this represents an amount which is eligible for Rollover/Transfer. Nationwide Retirement Solutions is entitled to rely fully on my certification. I expressly assume responsibility for the eligibility of this Rollover/Transfer and any tax consequences relating to this Rollover/Transfer and I agree Nationwide Retirement Solutions will not be responsible for those tax consequences.

I hereby request my funds to be allocated and invested as directed on this form. I understand some mutual funds may impose a short term trading fee. Please read the underlying fund prospectuses carefully.

Nationwide Retirement Solutions hereby agrees to accept the Rollover/Transfer described herein and upon receipt will deposit the proceeds within five business days in your account.

Participant Signature: _____ **Date:** _____

Retirement Specialist Name (Print): _____ Date: _____

Please note: *A Medallion Signature Guarantee may be required. Please contact your surrendering financial institution to confirm.

Medallion Signature Guarantee Stamp Here