



DROP Plan Redemption Request Form

Please read the following guidelines carefully before you complete this form and keep a copy for your records.

- This is form is a formal request to redeem the entire balance of your DROP account.
- The Fort Worth Employees' Retirement Fund recommends that you consult with a professional tax/financial advisor about distributions from retirement plans.
- All distributions from the DROP account are taxable unless rolled over to a qualifying retirement savings account (please consult a tax advisor for more information).
- This request constitutes a total distribution of your DROP account balance.

Section A – DROP Member Information (Please Print)

Member Name: _____ Date: _____

Social Security Number: _____ Telephone: _____

Section B – Distribution Election

I elect to receive a distribution of my total DROP account balance (this includes the current account balance less any unposted DROP transactions).

Initial here: _____

I elect to receive a distribution of my total DROP account balance after the posting of earnings or losses as of the closing period ____/____/____, less any unposted DROP transactions.

Initial here: _____

Section C – Mailing Instructions

Indicate how you wish to receive your distribution. If no option is indicated, a check will be mailed to the address on file.

- Forward check to my current address on record
- Transfer to my current bank account on record
- Forward check to the following financial institution as a direct rollover: _____*

*Member must furnish rollover instructions for redemption request to be processed.

Section D - Acknowledgement of Redemption Request

I authorize the Fort Worth Employees' Retirement Fund to redeem my entire DROP balance as directed above. I understand and agree with the requirements set forth on this form.

Member Signature

Date

Witness Signature

Date