MEBA - 401(k) Plan

1007 Eastern Avenue, Baltimore, MD 21202-4345 (410) 547-9111 or (800) 811-MEBA (6322)

IN-SERVICE WITHDRAWAL APPLICATION

Part 1: Employee Information	
Social Security #:	Date of Birth: (Month, Day & Year)
First Name & M.I.:	Last Name:
Street Address:	Apt. No. : New Address: Yes No
City:	State: Zip:
Daytime Phone:	Evening Phone:
Please check the appropriate type of transaction:	
Hardship withdrawal (Complete Parts 2, 4, 5 and the Affidavit on the Reason for Hardship Withdrawal Purchase of principal residence Prevent eviction from principal residence Repair to a principal residence that is not covered by casualty in: Age 59 ½ withdrawal (Complete Parts 2 or 3, 4, 5) You must withdrawal	xpenses
Age 70 ½ withdrawal (Complete Parts 2, 4, 5) Distributions must begin no later than the 1st day of April in the calendar year after you attain age 70 ½.	
Part 2: Amount of Withdrawal Amount Requested (check one): Maximum available on day of processing Specific dollar amount Minimum required amount (for 70 ½ withdrawals only) Entire account balance (for 59 ½ and 70 ½ only)	
Part 3: Rollover Information (available only for 59 1/2 withdraws	a <mark>ls)</mark>
I would like to rollover % of the eligible portion of this dist Choose only one: Fidelity Brokerage Rollover IRA IRA Outside Fidelity Name of Outside IRA Trustee or Qualif	
· · · · · · · · · · · · · · · · · · ·	Qualified Plan Sponsor, but must be mailed to the address you have on forward the check to the outside IRA Trustee or Qualified Plan Sponsor.
Date account established:	_
NOTE: If you do not roll over 100% of your withdrawal into and taxes, if required, will be withheld from the taxable portion of t another Qualified Plan or IRA.	
IRS guidelines require that you rollover your distribution within	60 days to an eligible plan to avoid any tax penalties.
unless you elect not to have taxes withheld).	awals, 10% of the employee pre-tax portion of the distribution will be withheld
Do Not withhold federal taxes Distribution may be subject to a mandatory withholding of state taxes.	Do Not withhold state taxes (or) Do withhold state taxes
Part 5: Signature	
SIGNATURE	DATED
PLAN OFFICE APPROVAL 084-2 Revised 2007-04	DATED

WHITE - MEBA PLAN COPY YELLOW - EMPLOYEE COPY