

403(b) Plan Financial Hardship Application

First Financial Administrators, Inc.



EMPLOYEE INFORMATION (Please Print)

FIRST NAME	MI	LAST NAME	SSN	
ADDRESS <small>(PO Box Unacceptable)</small>	CITY		STATE	ZIP
PHONE <small>(Between Hours of 8am-5pm)</small>	EMPLOYER	PROVIDER COMPANY NAME		
I REQUEST A WITHDRAWAL IN THE AMOUNT OF <small>(Amount not to exceed the hardship need)</small>		DATE OF LAST DEFERRAL		
\$ _____				

THE FOLLOWING DOCUMENTATION MUST BE PROVIDED FOR REVIEW/APPROVAL OF THE REQUEST:

(Explanation of Each on Page 2)

1. Participants Letter of Circumstances
2. All Supporting Documentation
3. Investment Provider Withdrawal Request
4. Investment Provider Statement
5. Financial Hardship Application (403bHA-0912)

I hereby certify that I have incurred a financial hardship as defined by the Internal Revenue Service regulations §1.401(k)-1(d)(3)(i). I certify that one of the following circumstances does exist concerning the participant, or an immediate family member who depends upon the participant for support.

- Medical expenses incurred by the participant, participant's spouse or dependent
- Purchase of participant's primary residence
- Payment of the next 12 months of postsecondary tuition and related education fees
- Prevention of foreclosure of the primary residence
- Funeral expenses for the participant's parent, spouse children or dependent

Hardships are not allowed for credit card debt or student loans.

Your annuity account is a supplemental retirement account and not a savings account. The income tax laws regulating this annuity plan require that you have no other available source of funds before requesting a hardship withdrawal. If you have insurance, a savings account, other retirement plans, or if you have any assets, the sale of which would help pay the expenses of your emergency, then you must first make use of these resources before drawing on your annuity account. If the sale of an asset would cause you further financial hardship, however, such sale is not required.

EMPLOYEE SIGNATURE (REQUIRED)

I hereby acknowledge that I have no other financial resources to meet my financial hardship, and all the facts I have presented are true and accurate. I fully understand that any distribution paid to me will be taken into account when determining the benefits to which I am entitled in the future and that said distribution must be reported as income in the year received. I further understand that this request is subject to approval by the Retirement Services Administrative Committee and agree to furnish further documentation upon request by the Plan Administrator.

EMPLOYEE SIGNATURE: _____ DATE _____

NOTARY

Subscribed and sworn before me this _____ day of _____, 20_____

NOTARY SIGNATURE: _____

My commission expires: _____

SEAL/STAMP

403(b) Plan Financial Hardship Application

First Financial Administrators, Inc.



HARDSHIP WITHDRAWAL REQUIREMENTS

You are required to take a distribution versus a hardship if one of the following qualifications are met.

- You are no longer employed by the employer of this plan or;
- Age 59 1/2

Submit complete Investment Provider paperwork for transaction and the following form and/or documentation:

Participant letter of circumstances:

The participant must write a letter explaining why they are requesting the unforeseen emergency.

Investment Provider Withdraw Request:

The unforeseen emergency withdrawal request form from the provider you have invested your contribution with.

Investment Provider Statement:

Your quarterly statement received from the provider you have invested your contribution with.

Completed Financial Hardship Application:

Financial Hardship Application F-403bHA-0912 (Must Be Notarized)

Supporting documentation:

You must provide evidence of expenses equal to or more than the amount you are requesting. The supporting documentation must match the reason stated in your letter of circumstances.

EXAMPLES OF DOCUMENTATION NEEDED:

Purchase of primary Residence:

- Provide your closing documents that indicate the purchase of the home, closing date and how much you are required to bring to closing

College Tuition:

- Provide proof of enrollment, schedule of classes enrolled in, amount due and date due

Foreclosure:

- Provide the foreclosure notice / letter from your mortgage stating you are in jeopardy of foreclosure
- Provide a copy of your current mortgage statement

Medical:

- Medical bills indicating procedures done
- Insurance explanation of benefits (Insurance company will send once payment is made)
- Current bill from the provider once insurance company has paid. The bill must be within the month of the request and indicate the amount you owe

Funeral expenses:

- Death certificate
- Funeral bill (must indicate the deceased and the name of the person responsible for the funeral expenses)