

NEZ PERCE TRIBE EMPLOYEES' RETIREMENT PLAN DISTRIBUTION REQUEST FORM

Termination Distribution Procedures

1. Participant requests distribution packet.
2. Once completed, participant returns both forms to Human Resources Dept. at last division worked.
3. Human Resources verifies participant information, approves distribution request, and forwards all paperwork to Randall & Hurley, Inc. for processing.
4. Randall & Hurley, Inc. prepares distribution memo, with instructions for payment and forwards to Wilmington Trust Company, Inc.
5. Wilmington Trust Company, Inc. receives payment instructions and issues check(s) / ACH(s) accordingly.

Participant Information

Name: _____ SSN: _____

Mailing Address: _____

City, State, Zip Code: _____ Phone #: _____

Date of Birth: _____ Date of Hire: _____ Date of Termination: _____

Which divisions have you worked for?

Please check ALL divisions that have ever applied since you began employment with the Nez Perce Tribe.

Nez Perce Tribe Clearwater River Casino Nez Perce Tribe Housing Authority Nimiipuu Health

Where to Submit Completed Form

Nez Perce Tribe	Clearwater River Casino	Nez Perce Tribal Housing Authority	Nimiipuu Health
Human Resources Department	Human Resources Department	Human Resources Department	Human Resources Department
<i>via Standard Mail</i> PO Box 365 Lapwai, ID 83540	<i>via Standard Mail</i> <i>or via Overnight Delivery</i>	<i>via Standard Mail</i> PO Box 188 Lapwai, ID 83540	<i>via Standard Mail</i> PO Box 367 Lapwai, ID 83540
<i>via Overnight Delivery</i> 120 Beaver Grade Road Rm#400 Lapwai, ID 83540	17500 Nez Perce Road Lewiston, ID 83501	<i>via Overnight Delivery</i> 111 Veterans Avenue Lapwai, ID 83540	<i>via Overnight Delivery</i> 111 Beaver Grade Road Lapwai, ID 83540

FOR OFFICE USE ONLY: ADMINISTRATIVE APPROVAL

Hours Worked (current year only): _____ Last Payroll Date: _____ Division: _____

Historical Hours Worked

Division	Year	Hours Worked

Instructions:

The administrator should (1) verify the dates listed above, (2) complete the current year information above, (3) complete the historical information for vesting verification, and (4) submit a copy of this form to Randall & Hurley, Inc.

Date Submitted to Randall & Hurley, Inc.: _____

Signature: _____

Print Name: _____

Outstanding Loan: Y _____ N _____

Forward all distribution request forms to Randall & Hurley, Inc. via fax at (509) 838-1388 or via mail to Randall & Hurley, Inc., 601 W. Riverside Ave., Suite 1600, Spokane, Washington, 99201.

