

Municipal Employees' Retirement System of Louisiana

7937 Office Park Boulevard, Baton Rouge, LA 70809 / 225-925-4810 / Toll Free 1-800-820-1137 / Fax 225-925-4816

TRUSTEE TO TRUSTEE TRANSFER

SECTION 1: TO BE COMPLETED BY APPLICANT

PRINT OR TYPE ALL INFORMATION

Member's name (First, Middle, Last)

Application Date

Social Security number

Member's mailing address

City, State

Zip

Daytime

Telephone number

Evening

Telephone number

I hereby authorize

the

to make a direct transfer of my qualified account to

Municipal Employees' Retirement System which is a qualified plan under section 401 (a) of the Internal Revenue Service Code.

I have read and understand the "Federal Tax Notice: IRS Tax Status of Eligible Rollover Distributions" as it pertains to these assets.

Member's Signature

Date

SECTION 2: TO BE COMPLETED BY FINANCIAL INSTITUTION

By delivering assets to the Municipal Employees' Retirement System of Louisiana/Plan Trustee/ Custodian, the Employee/Account Holder acknowledges and certifies the following:

1. The distribution qualifies as an IRS eligible Transfer to Transfer for a qualified plan/entity;
2. No required minimum distributions are being transferred; and
3. The transfer once made, is **irrevocable**.

PLEASE ATTACH THIS COMPLETED FORM TO THE CHECK AND MAIL TO MERS AT THE ADDRESS SHOWN ABOVE.

Amount of Transfer

Financial Institution name

Authorized representative's signature

Mailing Address

Print Name & Title

City, State, Zip

Date

Telephone

PLEASE RETAIN COPY FOR YOUR RECORDS