

Spousal Consent



Please use blue or black ink only. All pages must be returned excluding the 402(f) Notice of Special Tax Rules on Distributions.

Plan Name: _____

Participant's Name

Social Security Number

Participant Statement

I verify that I am not married and therefore do not need a notarized "Spousal Consent Form"

Participant's Signature

Date

Spousal Consent

You must have your spouse's signature notarized or have the Plan Administrator witness your spouse's signature. The date the spouse signs must be the same date as the date notarized or witnessed.

You must obtain your spouse's consent to elect a retirement option other than a Qualified Joint and Survivor Annuity. Your spouse's consent must be obtained no more than 180 days prior to the effective date in order to be effective.

I hereby voluntarily consent to the participant's request for a disbursement as indicated on this form. I understand that by providing such consent, with respect to all amounts the participant is hereby electing to receive, I am voluntarily waiving my right to receive a survivor annuity which would otherwise be payable to me during my life and upon the participant's death.

Spouse's Signature

Date

Statement of Notary

NOTE: Notary seal must be visible.

State of _____)
County of _____)ss.

The consent to this request was subscribed and sworn to (or affirmed) to before me on this _____ day of _____, 20____, by _____ (name of spouse) proved to me on the basis of satisfactory evidence to be the person who appeared before me, who affirmed that such consent represents his/her free and voluntary act.

SEAL

Notary Public _____ My commission expires _____

OR

Statement of Plan Administrator

The spouse whose signature I have witnessed is known to me and signed this form in my presence.

Plan Administrator Signature

Date