Iowa
**Retirement Investors' Club (RIC)**
*Look forward to retirement!*

**RIC 457/401a Plans**
# Transfer Between RIC Providers

**Personal Information**

Last name _____ First name _____ M.I. _____ Social Security # _____ Last 4 digits only

**Transfer Request**

**Transfer:** ☐ All accounts ☐ Single Account # _____

**From:** ☐ AIG ☐ Empower* ☐ Horace Mann ☐ Voya Other ☐ _____ Inactive Provider Name

**To existing account with:** ☐ AIG ☐ Empower* ☐ Horace Mann ☐ Voya

***Please note:*** *To ensure a timely transfer, contact your receiving provider to ask if additional paperwork is required.*

**Authorization**

I authorize my employer to process this request. I have access and agree to the terms and conditions of the Iowa Retirement Investors' Club (RIC) as disclosed in the Plan Documents. I have established 457 and 401a accounts with the receiving RIC provider. I understand that withdrawals may only be made upon termination of employment or qualification for an in-service distribution.

**X**_____ _____
Participant Signature Date

**Advisor Use:** The employee has established 457/401a accounts with: _____
Receiving Provider Name

Print Agent Name _____ Agent Phone Number _____ Agent Signature _____ Date _____

**Form Submission**

**Email:** ric@iowa.gov | **Fax:** 515-281-5102 | **Mail:** DAS-HRE ▪ Attn: RIC ▪ 1305 E Walnut ▪ Des Moines, IA 50319

**Office Use Only**

*Make check payable to:* _____ FBO: Participant, Plan #: _____

*Mail to:* _____

_____

*RIC administrator signature:* _____ Date: _____

*Empower – formerly MassMutual Retirement