

CERTIFICATION OF MARITAL/SINGLE STATUS

Federal Law requires the Trustees to confirm whether a previous spouse is entitled to any portion of your pension benefits. As such, it is necessary that we request the following certification and supporting documentation. **Failure to complete this form fully, including signing it in front of a notary public, and providing ALL documentation requested, will result in a delay of the processing of your application.**

Participant Name: _____ SSN: _____

- Current marital status:
- SINGLE, NEVER MARRIED
 - SINGLE, PREVIOUSLY MARRIED*
 - MARRIED, NO PREVIOUS MARRIAGES
 - MARRIED, WITH PREVIOUS MARRIAGE(S)*

*If you have had previous marriages, please list the names of your ex-spouses, the date(s) of marriage and date(s) of divorce (if any of your previous marriages ended due to the death of your spouse at the time, please list the date of death):

<u>Ex-spouse's Name</u>	<u>Date of Marriage</u>	<u>Date of Divorce/Death</u>
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Please provide complete copies of ALL marriage certificates, divorce decrees, separation agreements, Qualified Domestic Relations Orders and any other accompanying documents related to the termination of your previous marriage(s). If any previous spouses have passed away, please provide a copy of the death certificate(s). If you do not have these documents, you should contact the appropriate court through which the proceedings occurred in order to obtain certified copies.

I hereby certify, subject to the penalty of perjury, that the above information is, to the best of my belief and knowledge, true and complete. ANY PERSON WHO SUPPLIES A FALSE CERTIFICATION IN CLAIMING A BENEFIT FORFEITS ANY RIGHT HE OR SHE MAY HAVE TO THE BENEFIT AND, UPON DISCOVERY, BECOMES LIABLE FOR FULL REPAYMENT OF ANY MONEY RECEIVED AS A CONSEQUENCE.

Your Signature

Your Social Security No.

Today's Date

Subscribed to and sworn to before me,
This _____ day of _____, 20____.

Notary Public, _____ County

State of _____

My Commission expires _____

DO NOT SIGN AND DATE THIS FORM UNLESS YOU ARE IN THE PRESENCE OF A NOTARY.

**SHEET METAL WORKERS' LOCAL UNION NO. 80 ANNUITY FUND
DISTRIBUTION ELECTION FORM**

I hereby acknowledge receipt of the SPECIAL TAX NOTICE REGARDING SHEET METAL WORKERS' LOCAL UNION NO. 80 ANNUITY FUND PLAN PAYMENTS which explains my right to choose how my Plan benefit will be distributed and taxed. I understand the contents of the SPECIAL TAX NOTICE, and that I have at least thirty days from the date that I received the SPECIAL TAX NOTICE to decide how I want my Plan benefit paid. I hereby affirmatively elect the following (Check only one):

_____ I hereby elect to have my entire Plan benefit paid in a direct rollover to my IRA.

_____ I hereby elect to have my entire Plan benefit paid directly to me and I understand that 20% of my benefit must be withheld for federal taxes.

_____ I hereby elect to have my Plan benefit divided as follows:

I elect to have \$ _____ paid in a direct rollover to my IRA and to have the remainder of my Plan benefit paid directly to me

OR

I elect to have \$ _____ paid directly to me in cash and to have the remainder of my Plan benefit paid in a direct rollover to my IRA.

I understand that in either case above, 20% of the amount to be paid directly to me in cash must be withheld for federal taxes.

DIRECT ROLLOVER INSTRUCTIONS:

If you have elected a direct rollover of all or part of your benefit, please complete the section below:

Company Name of Custodian of your IRA: _____

Your IRA Account Number: _____

Address of the Custodian of IRA: _____

Authorized Signature of Custodian _____

Printed Name of Custodian: _____

Phone Number of Custodian _____

Your Signature: _____

Date: _____

Your Name (please print): _____

SSN: _____

Instructions to Applicant for a Defined Contribution Distribution

Please submit copies of the following documents with your application for benefits:

- Birth Certificate for you and your spouse (see below for alternative documents*)
- Marriage License
- Copy of current driver's license or current state I.D. (with photo) for you and your spouse
- If you have ever been divorced or legally separated, please submit a complete copy of your Judgment(s) of Divorce and Qualified Domestic Relations Orders (including Separation Agreements, Property Settlement Agreements and any similar or related orders with any attachments).
- If you have ever served in the military or other uniformed services of the United States, please submit copies of your induction and discharge papers and the Credit for Uniformed Service for the United States Form.

***ALTERNATIVE PROOF OF AGE DOCUMENTS** – accepted when birth certificate is unavailable.

In order to be eligible for retirement benefits, you are required to produce proof of your age. The following is a list of the documents that may serve as proof of your age. Some of these documents are better proof than others. The list is arranged starting with the best type of proof, and going down to the less desirable types of documents. You are required to furnish the best type of proof that is available. You do not have to furnish the original of any of these documents; you may submit a photocopy.

1. A birth certificate.
2. A baptismal certificate or a statement as to the date of birth shown by a church record, certified by the custodian of such record.
3. Notification of registration of birth in a public registry of vital statistics.
4. Hospital birth record, certified by a custodian of such record.
5. A foreign church or government record.
6. A signed statement by the physician or midwife who was in attendance at birth, as to the date of birth shown on their records.
7. Naturalization record.
8. Immigration papers.
9. Military record.
10. Passport.
11. School record, certified by the custodian of such record.
12. Vaccination record, certified by the custodian of such record.
13. An insurance policy, which shows the age or date of birth.
14. Marriage records showing date of birth or age (applications for marriage license or church record, certified by the custodian of such record; or marriage certificate).
15. Document showing approval of Social Security Pension.
16. Other evidence, such as signed statements from persons who have knowledge of the date of birth, voting records, poll-tax receipts, driver's license, etc.