

Personal Information

Employer Name:	Employer Number:
Name:	Social Security Number:
Address:	City, State, & Zip Code:
Date of Birth:	Home Phone Number:
Department:	Work Phone Number:
Date of Hire	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Email Address:	

Rollover/Transfer Funds From

- 401(a) Drop
 403(b)
 Governmental 457
 Roth Governmental 457
 401(k)
 Roth 401(k)
 Traditional IRA
 Deemed IRA
 Deemed Roth IRA
 Roth IRA

Carrier/Custodian Name:	Account Number:
Address:	Contact Name:
City, State, & Zip Code:	Contact Phone Number:

Rollover/Transfer Funds To

- Plan Type: 457 401(a) 401(k) Deemed Roth IRA Roth 457 Roth 401(k)

Make check payable to: Nationwide
FBO (Participant Name, SS#, Acct#)

Amount to Rollover/Transfer:
 Partial Dollar Amount \$ _____
 Total Account Balance

Mail check to: Nationwide Retirement Solutions
PO Box 183150
Columbus, OH 43218

457 to 457 Incoming Assets

Some 457(b) Plan documents allow participants who leave one employer and accept a position with a new employer, the option to TRANSFER or ROLLOVER the assets from the first employer. The choice of transfer or rollover will determine when the assets are available for distribution from your NRS account.

I have severed from employment from my previous employer on _____(date).

The difference between a transfer and rollover:

- Following a Transfer, withdrawal of assets is permitted only when the account holder experiences a distributable event. (e.g. Severance of employment or age 70 ½.)
- Following a Rollover, withdrawal of assets is permitted at any time pursuant to the account holder's request.

Please make your selection: TRANSFER ROLLOVER

Investment Direction to Nationwide

- Credit my rollover/transfer according to the current allocation on file
 OR
 Credit my rollover/transfer as listed below:

*If you do not indicate your allocation choices, your rollover will be credited to your current allocation.

*Additionally, if you select an investment option that is closed, your rollover/transfer will be credited to the Nationwide Money Market Fund.

Investment Option	Percent
Must total	100%

Authorization

I acknowledge that I have received and read the fund prospectuses for the investment options I have elected above. I understand that my rollover will become subject to the terms and conditions of the plan. I understand that all distributions will be withdrawn on a pro-rated basis across all accounts within the plan selected. I certify that I satisfy the requirements for making a pre-tax rollover/transfer into an eligible retirement plan. Nationwide Retirement Solutions is entitled to rely fully on my certification. I expressly assume responsibility for tax consequences relating to this rollover/transfer, and I agree that Nationwide shall not be responsible for those tax consequences.

Upon receipt, I hereby request my funds to be invested as directed on this form. I understand that some mutual funds may impose a short-term trade fee. Please read the underlying prospectuses carefully.

Nationwide Retirement Solutions hereby agrees to accept the rollover/transfer described herein and upon receipt will deposit the proceeds within 5 business days in the account established on behalf of the individual's eligible employer.

Important: Please liquidate and transfer all securities necessary to complete this transaction.

Participant Signature:	Date:
Retirement Specialist Name (Print):	Date:

Please note: *A Medallion Signature Guarantee may be required. Please contact your surrendering financial institution to confirm.

Medallion Signature Guarantee Stamp Here