

- CONFIRMATION
- REQUEST

Pension Fund of the Christian Church  
(Disciples of Christ)  
130 East Washington Street  
INDIANAPOLIS INDIANA 46204-3659

### ADDITIONAL BENEFIT WITHDRAWAL REQUEST

Name \_\_\_\_\_ A.B. Account No. \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Phone No. \_\_\_\_\_

Amount \$ \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**For Tax Deferred account, the net amount you wish to receive \$ \_\_\_\_\_**

**WILL PICK UP AT P.F. OFFICE \_\_\_\_\_**

On Tax Deferred withdrawals, a 20% Federal Income Tax withholding is required. For example, if you want to receive \$1,000, a withdrawal of \$1,250 is needed. (20% of \$1,250 is \$250. \$1,250 - \$250 is \$1,000.)

No fee is charged for the 1st withdrawal from an A.B. Account each month. There will be a \$10 fee for the 2nd and subsequent withdrawals during the same month.

**For check being sent to bank, please complete:**

Bank Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Credit Account of \_\_\_\_\_ Account # \_\_\_\_\_

**If funds are to be wired, there is a charge of \$25.00.**

**For wired funds, the bank routing number (9 digits) is required.**

**Bank Routing (ABA) # \_\_\_\_\_ Bank Telephone Number \_\_\_\_\_**