

PARTICIPANT LOAN REQUEST

Name of Company: _____

Name of Plan: _____

Name of Participant: _____

Address: _____

Social Security Number: _____

I request a loan from the above-referenced plan as follows:

Amount of Loan Requested _____

Repayment Period (not to exceed 60 months) _____

Effective Date of Loan _____

First Payment Date (must be within 30 days) _____

Payroll Frequency (check one)

Monthly Semi-Monthly Bi-Weekly Weekly

I understand there is a \$100.00 set up fee for this loan, which will be taken from account at the time this loan is processed.

Participant

Date