

**Electronic
Funds
Transfer
(EFT)**

(Complete this section only if you choose to have your payment(s) sent by EFT)

If you would like your disbursement sent to you via EFT, please provide the information below.

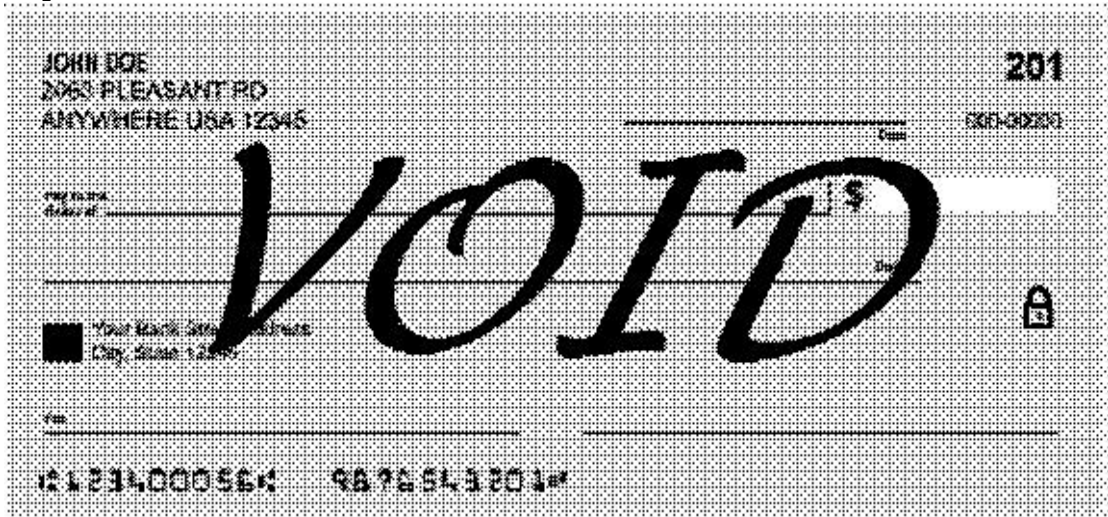
Type of Account (please choose one):

- Checking (Must attach a voided check below, or include a letter from your financial institution, with participant's name, checking account number, and ABA routing number)
- Savings (Must include a letter from your financial institution with participant's name, savings account number, and ABA routing number)

IMPORTANT: Your EFT payment may result in a check payable to you if:

- You have not also contacted Empower (formerly Prudential) at 855-756-4738
- to establish this bank information on your account directly with them prior to disbursement.
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Please Tape Voided Check Here:



I have carefully read this form and I hereby authorize Empower to make this Plan payment(s) to the financial institution listed above in the form of Electronic Fund Transfer (EFT). I understand Empower is not responsible for any losses associated with incorrect information provided (e.g. wrong banking instructions). The credit will typically be applied to your account within 2 business days of being processed.

In the event that an overpayment is credited to the financial institution account listed above, I hereby authorize and direct the financial institution designated above to debit my account and refund any overpayment to Empower.

**Your
Authorization**

As a participant under the plan, I hereby authorize Empower to make, if applicable, all of my installment retirement plan payments to the bank account I listed above in the form of direct deposit via electronic fund transfer (EFT).

In the event that an overpayment is credited to my bank account during or after my lifetime, I hereby authorize and direct the bank designated above to debit my account and refund any overpayment to Empower. This authorization will remain in effect until Empower receives a written notice from me stating otherwise and until Empower has had a reasonable chance to act upon it.

If I am unable to complete this form, a duly appointed representative (guardian or attorney-in-fact) may arrange for my retirement plan checks to be deposited directly into my bank account by completing and signing the form as an authorized representative. The authorized representative must provide Empower with a copy of the document granting the specific authority to act in this capacity.

Signature X _____ Date _____