



MG4K 35776 700000139334177

JOSHUA A LAZAR
28400 CAMBRIDGE LANE
PEPPER PIKE OH 44124

Confirmation 231882314W247
Request ID 700000139334177
Transaction TOTAL DISTRIBUTION
Plan Number 35776
Plan Name SHW PIP PENSION

Don't let your request expire! Complete, **SIGN** and return **ALL** pages of this application in time to arrive by 09/05/2023.

Questions? Go to www.401k.com or call 800-323-4015

Full Distribution - Withdrawal

Helpful To Know

- If the market value of your account changes before your request is processed, your distribution could be different than the amount shown on this form.
- Workplace retirement plan distributions may have tax consequences. You may want to consult a tax or financial professional.
- You **MUST** certify your marital status on this form.
- Federal tax regulations and your plan require your spouse's consent for your request. Fidelity cannot process your request without your spouse's consent being witnessed by either a notary public or the plan administrator's representative.

Distribution Details

Terms of Request

Request Date 07/07/2023
Amount Requested Full Vested Account Value
Cash Amount \$362.34 *Pre-tax assets (taxable).*

Delivery and Fees

Delivery Method *Timings are estimates, not guarantees, and start when Fidelity receives all your required materials.*
Cash Amount **Check** *Sent by regular mail to your mailing address. Allow 7 business days.*

Values *Could be different if your account value changes.*

Withdrawal as Cash **\$362.34**
Includes any tax withholding.

Estimated Total Transaction Amount **\$362.34**

Your Plan's trustee will calculate your tax withholding. Taxes may be deducted from your distribution proceeds. Withholding amounts do NOT include early withdrawal penalties, which you could owe because you are under age 59½.

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Marital Status Verification Indicate Marital Status

☐ Not married ☐ Married *Your spouse must sign this form.*

Spouse's Consent Spouse to complete. Required by federal tax regulations and by the terms of your plan.

By signing below, you, the participant's spouse:

- Voluntarily consent to the transactions(s) indicated on this form, knowing that the participant's request is not valid without your consent.
- Acknowledge that you cannot take back your consent once this transaction has been processed.
- Acknowledge that the participant's waiver of a qualified joint and survivor annuity, if applicable, is not valid without your consent.
- Acknowledge that you may be giving up your right to receive assets from this transaction that would otherwise go to you upon the participant's death.
- Notary services must be from a United States notary, military officer, or consulate.

Spouse Notarized Signature or in the presence of Plan Administrator.

Spouse Signature

SIGN

Certificate of Acknowledgement of Notary Public or Plan Representative Witness

On this _____ day of _____, 20____ before me, the undersigned notary public, the above named individual proved to me through satisfactory evidence of identification, which were _____, to be the person whose name is signed on the preceding or attached document and acknowledged to me that (he)(she) signed for its stated purpose.

Seal impression must be photo-reproducible

Print Notary Name

NOTARY SEAL/STAMP

Notary Signature

Date MM DD YYYY

SIGN

My commission expires ____/____/____.

Plan Representative Signature

Date MM DD YYYY

SIGN

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Signature and Date You must sign and date.

By signing below, you:

- Certify that all information you have provided is authentic and correct to the best of your knowledge.
- Authorize Fidelity to act on all instructions given on this form.

Your Name JOSHUA A LAZAR

Your Signature Required	Date MM DD YYYY	Daytime Phone Number NNN-NNN-NNNN
<div>SIGN</div>		

AVOID PROBLEMS WITH YOUR REQUEST!

Use this checklist to be sure your request is complete:

☐ SIGN the form.

☐ You must certify your marital status on this form.

☐ Have your spouse sign the form in the presence of a notary.

☐ Remember to return the ENTIRE application including the first page.

Still have questions?

Call 800-323-4015 (TTY, 1-888-343-0860), business days (except NYSE holidays) from 8:30 a.m. - midnight ET or go to www.401k.com.

Ways to Return This Form to Fidelity:

Electronically

Use the Send a Document Action found in the NetBenefits Mobile apps. under Actions Menu.

Regular mail

Fidelity Investments
PO Box 770003
Cincinnati, OH 45277-0065

Overnight mail

Fidelity Investments
100 Crosby Parkway KC1F
Covington, KY 41015

FAX 1-800-347-2805

Make sure the notary seal for your spouse's signature is either inked or shaded. Allow 2 hours for our system to validate receipt of your document (if sending electronically or faxing after 4:00PM Eastern Time, allow until the next business day). An automatic confirmation will be sent to the email address we have on file for you.

On this form "Fidelity" shall mean Fidelity Investments Institutional Operations Company, LLC, 245 Summer Street, Boston, MA 02210 644061.1.0 (09/2013)

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