

REQUEST FOR LOAN DOCUMENTATION FORM

This form is used by a plan participant to request loan documentation in order to initiate a loan from the Employer's retirement plan. You can also request loan documentation through the AccountLink System either online at www.WebAccountLink.com or by calling toll free at 1-888-621-5491.

INSTRUCTIONS

Before you complete this form, please do the following:

- Review your account to determine the loan amount available to you. You can access your account information by logging on to the *AccountLink* website at www.webaccountlink.com or by calling the *AccountLink* hotline toll free at 1-888-621-5491.

After you have completed this form, please do the following:

- Review the form for accuracy including personal and distribution information.
- Be sure to include your signature.
- Return this form to Professional Capital Services, LLC as indicated in Section 4 of the attached form.

REQUEST FOR LOAN DOCUMENTATION FORM

SECTION 1 - Personal Information

Employer: _____ Plan: _____
First Name: _____ MI: _____ Last Name: _____
Social Security #: _____ Date of Birth: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone #: _____ Work Phone #: _____ Ext: _____

SECTION 2 - Participant's Loan Request Information

I hereby request loan paperwork as follows:

Requested Loan Amount: \$_____ Requested Repayment Term: _____

Reason for Loan: _____

SECTION 3 - Participant's Signature

I understand that the purpose of this form is to request Loan paperwork only. It is not a guarantee that loan approval will be granted by the Plan Sponsor. Additionally, assets will not be liquidated to generate the cash for loan proceeds until receipt of the final, approved loan paperwork. I understand and agree that if I take a loan from my account, a loan application fee may be charged directly to my account.

Participant's Signature: _____ Date: _____

SECTION 4 - Mail/Fax Instructions

After the participant completes this form, a copy of this form should be immediately mailed or faxed to:

Professional Capital Services
1735 Market Street, Suite 3200
Philadelphia, PA 19103
Fax: (215) 575-7451

SECTION 5 - Third Party Administrator Authorization

The Third Party Administrator authorizes the request for loan documentation as designated above.

Third Party Administrator Signature: _____ Date: _____