



THE
NEWPORT
GROUP

**AMERICAN MARITIME OFFICERS 401(k) PLAN
ROLLOVER CONTRIBUTION FORM**

NOTICE: This form is used to accept rollovers from another employer's Qualified Plan or from a conduit Individual Retirement Account ("IRA"). If you have not already done so, you must complete a Beneficiary Designation Form.

SECTION 1 INFORMATION

Participant Data
(Please print)

Last: _____ First: _____ Middle Initial: _____

Street: _____

City: _____ State: _____ Zip: _____

_____/_____/_____
Social Security Number

Date of Birth

Marital Status:
 Married Single
 Divorced Separated

Home Phone

Cell Phone

Date of Hire

SECTION 2 ROLLOVER CONTRIBUTION AMOUNT (CHECK ONE)

You may request a rollover into the Plan of any amount that is an "eligible rollover distribution," as described in the tax notice regarding plan payments that should have been provided to you when you received a distribution from your prior employer's plan. Certain distributions - for example, installment payments that are part of a series running for 10 years or more, certain "hardship" distributions, or "minimum required distributions" after you reach age 70½ - are not eligible for rollover into the Plan.

I request that the Plan accept a rollover contribution from my previous employer's qualified plan or my conduit IRA. (A "conduit IRA" is an IRA that contains only amounts rolled over from a previous employer's qualified plan, plus earnings on those amounts.) I certify that my rollover contribution will be paid from the following sources (check one or more, as applicable).

- A direct transfer from my prior employer's qualified plan or my conduit IRA, in the amount of (enter approximate amount): \$ _____
- A check from my previous employer's qualified plan, made payable to WTRISC FBO AMO 401(k) Plan #a4067 FBO "my name," is attached.
- Since the distribution was paid directly to me, I have attached a Cashiers Check or Money Order payable to WTRISC, FBO AMO 401(k) Plan #a4067 FBO "your name". I understand I have the option to include (or not to include) in this check the amount of any taxes withheld plus any outstanding loan balance deducted from the original distribution, in order to maximize the amount rolled over and to avoid any portion of this contribution being considered taxable to me. The distribution was rolled over within 60 days of receiving the distribution(s) from my previous employer's qualified Plan(s).
- This rollover is from a Conduit IRA. I have placed no additional money into the Conduit IRA other than the rollover contribution(s). A check made payable to WTRISC, FBO AMO 401(k) Plan #a4067 FBO "your name" is attached.

I certify that the amount of \$ _____ of my eligible rollover distribution is from non-taxable (after-tax) contributions made to my prior employer's plan.



THE
NEWPORT
GROUP

SECTION 3 INVESTMENT OF YOUR CONTRIBUTION

If you have a balance in the Plan, your rollover contribution will be invested based on your current investment election on file for future contributions. If you do not have a current balance in the Plan, your rollover contribution will be placed 100% into the Dodge and Cox Balanced Fund. Once your rollover has been deposited in the Plan you may make an investment election to transfer these monies to other investment fund options on the website or over the telephone at any time.

SECTION 4 PARTICIPANT SIGNATURE

I certify that this rollover represents taxable monies originating from a previous employer's qualified plan or conduit IRA, and non-taxable contributions if applicable. I additionally certify that the information in this form is complete and accurate.

Signature of Participant

Date

SECTION 5 THIS SECTION USED FOR PLAN OFFICE AUTHORIZATION

Plan Office Authorization

Date

Return Form to:

American Maritime Officers 401k Plan
2 West Dixie Highway
Dania Beach, FL 33004
Phone : (800)348-6515 Ext 14
Fax (954) 922-7539