

Loan Prepayment Request

International Association of Plumbing & Mechanical Officials 401(k) Plan

765485-01

Participant Information

Last Name			First Name			MI			Social Security Number								
(The name provided MUST match the name on file with Service Provider.)																	
Address - Number & Street																	
City				State				Zip Code				E-Mail Address					
Mo				Day				Year				<input type="checkbox"/> Married <input type="checkbox"/> Unmarried					
Date of Birth																	
()				()				Home Phone				Work Phone					

Payment Information

- ☐ Principal Reduction Method - You can elect to send a partial prepayment to reduce the principal balance of your loan. To elect this option, mail this completed form and your payment made payable to Empower Trust Company, LLC to the address indicated below. Consider submitting payment by certified check or money order. The payment received will be applied first to the current payment due and then to the outstanding principal balance.

I understand this does not change the payment amount of the loan and I must continue making regularly scheduled payments until the loan is paid in full.

- ☐ Prepayment Method - You can elect to send a partial prepayment to be applied to future repayments of your loan not to exceed 30 days. To elect this option, mail this completed form and your payment made payable to Empower Trust Company, LLC to the address indicated below. Consider submitting payment by certified check or money order. The payment received will be applied first to the current payment due and then to future repayments including principal and interest. This option is typically for the reason of a leave of absence.

I understand this does not change the payment amount of the loan and I must resume making the regularly scheduled payments until the loan is paid in full.

Amount of Attached Payment \$ _____ Loan Number _____

Note: Consider submitting payment by certified check or money order. Make payment payable to Empower Trust Company, LLC.

Payments received are reinvested in your account in accordance with the investment election in effect at the time the payment is received.

Attach payment here.

Required Signature

Any payment received will be applied first to the current payment due and then according to the payment method selected in the Payment Information section of the form. My signature acknowledges that I have read, understand and agree to this Loan Prepayment Request form.

Participant Signature

Date

A handwritten signature is required on this form. An electronic signature will not be accepted and will result in a significant delay.

Participant forward to Service Provider at:

Empower Trust Company, LLC

PO Box 825725

Philadelphia, PA 19182-5725

Express Address:

PNC Bank

525 Fellowship Rd, Suite 330

Lockbox # 825725

Mt Laurel, NJ 08054-3415

Phone #: 1-833-569-2433

Website: empowermyretirement.com

We will not accept hand delivered forms at Express Mail addresses.

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Effective December 31, 2020, Empower acquired the Massachusetts Mutual Life Insurance Company's (MassMutual) retirement business. Empower administers the business on MassMutual's behalf, with certain administrative services being performed by MassMutual and its affiliates during a temporary transition period. Empower is not affiliated with MassMutual or its affiliates.