UNIVERSITY HEALTH 403(B) PLAN GROUP ROLLOVER FORM



Section I – Personal Information			
<u>Required</u>			
Name:			SSN Last 4:
	First	Last	
<u> Optional – H</u>	lelpful for potential	<u>follow up</u>	
Email:			Phone Number:
Section II -	– Group Rollove	r	
(403(b) P	•	•	ugusta, Georgia Retirement Savings Plan group rollover to the Piedmont Healthcare
	ceived the special t t Healthcare in Ma	•	art of the termination notice sent by
Signature:			Date:
Section III	– Loan Rollover	(if applicable	<u>=</u>)

If you have an existing plan loan from your University Hospital of Augusta, Georgia Retirement Savings Plan (403(b) Plan) it will be included in the group rollover to the Piedmont Healthcare 401(k) Tomorrow Plan. In addition to the Group Rollover Form, you need to also complete a Fidelity Electronic Loan Payment Authorization Form to allow for direct loan payments after the group rollover is completed.

Section IV - Administration

Group rollover is expected to be processed in August 2023. Funds will be invested based on your existing Piedmont 401(k) investment elections and will be available in a Rollover 403(b) source.

Forms can be returned in-person to a Cannon Financial Strategists advisor or mailed to:

Piedmont Augusta 1402 Walton Way, Augusta, GA 30901 Attn: Cannon Financial Strategists