

**ROLLOVER-IN CONTRIBUTION FORM**

(To be completed by an employee who wants to deposit funds from another qualified plan into Employee Savings Plan)

After your Rollover contribution has been received for deposit into your account, you will receive a written confirmation from Prudential Retirement.

<b>Section 1: INFORMATION ABOUT YOU</b>			
Name (First M.I. Last)		Social Security Number	
Street Address		Date of Birth	
City	State	Zip Code	Daytime Phone Number
<b>Section 2: ABOUT YOUR ROLLOVER CONTRIBUTION</b>			
<b>PREPARING YOUR ROLLOVER CONTRIBUTION FOR DEPOSIT</b>	<ol style="list-style-type: none"> <li>Your Rollover contribution should be sent to Prudential at the address below.</li> <li>Be sure to have your name and your social security number placed on the Rollover check.</li> <li>Your Plan ID must also be clearly visible on the check.</li> </ol>		
<b>INSTRUCTIONS FOR TRANSMITTING YOUR ROLLOVER DEPOSIT</b>  Your prior recordkeeper should send a check for the amount of your Rollover contribution for Direct Rollover into the Plan →	<ol style="list-style-type: none"> <li>Make check payable to CONNECTICUT GENERAL LIFE INSURANCE COMPANY (CGLIC).</li> <li>Your name, Plan ID, and your social security number should be clearly visible on your check.</li> <li>Mail check to: <b>Prudential Retirement</b>                      Attn: Plan ID 66642                      4131 Collection Center Drive                      Chicago, IL 60693</li> </ol>		
<b>Section 3: CONFIRMATION OF YOUR ROLLOVER CONTRIBUTION</b>			
Rollovers must consist of money for which you have never paid taxes. If you don't know whether or not your money comes from a qualified plan or conduit IRA that contains only taxable qualified plan money, please contact your prior plan administrator or tax advisor.			
I want to deposit this amount:  \$ _____		How much, if any, of your rollover contribution consists of after-tax contributions that you originally contributed to a qualified plan?  \$ _____	
<b>Section 4: INVESTING YOUR ROLLOVER CONTRIBUTION</b>			
Complete the following section to tell us how you want to invest your rollover contribution. The investment percentages must add up to 100%.			
AIM	Aim Value Account	%	%
CFB	Balanced/Wellington Mngmt	%	%
SAV	Growth & Income Multi - Manager	%	%
GIF	Guaranteed Income Fund	%	%
JAG	Janus Adviser Growth Account	%	%
LCV	Large Cap Value/John A. Levin	%	%
		%	%
		%	<b>TOTAL OF INVESTMENT ELECTIONS</b>
			<b>100 %</b>
<b>Section 5: PLAN ADMINISTRATOR CERTIFICATION</b>			
I certify that my Rollover contribution meets the Plan's eligibility requirements and should be invested as elected in Section IV.			
<b>Member Signature:</b> _____		<b>Date:</b> _____	
I certify that these funds meet the Plan's rollover eligibility requirements.			
<b>Plan Administrator Signature:</b> _____		<b>Date:</b> _____	