## H.M. PAYSON & Co. IRA ACCOUNT IRA DISTRIBUTION REQUEST

## **GRANTOR INFORMATION:**

Name:				Resident State:
TYPE OF DISTRIBUTION: (Select One Type)  Normal (age 59 ½ and older)  Early (under age 59 ½) no known exception  Substantially Equal Series (exception for those under age 59 ½)  Permanent Disability  Death				
DISTRIBUTION METHOD - (Select #1 or #2 below ☐ #1 One-Time Distribution ☐	v) Required Annual Minimum (if applicable) \$	OR		Amount \$
☐ #2 Scheduled Distributions ☐  Frequency: ☐ Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually	Required Annual Minimum (if applicable)	OR		Amount \$(Per Payment)
□ #3 As Requested			Amount	\$
☐ #4 Convert to Roth IRA			Amount	\$
TAX WITHHOLDING ELECTION: (PLEASE READ THE TAX WITHHOLDING INSTRUCTIONS.)				
Select One Box Below    Do not withhold any federal income tax from the gross distribution amount.   Withhold 10% federal income tax from the gross distribution amount. (This is the default withholding amount)   Withhold % federal income tax from the gross distribution amount (must be at least 10%).   Withhold \$ federal income tax from the gross distribution amount. Not available for scheduled distributions.    STATE INCOME TAX WITHHOLDING: If NO election is made, we MUST withhold as outlined in the instructions.				
DISTRIBUTION INSTRUCTION: (Select one option below)				
#1. Send Check to Address of Record				
<ul> <li>         □ #2. Transfer internally to acct#     </li> <li>         □ #3. Send Check to Bank     </li> </ul>				
#4. ACH Deposit per ACH Agreement (Electronic Deposit Agreement on file or provided herewith) (Available only with scheduled month-end distributions.)				
☐ #5. Federal Fund Wire* ☐ 3a. To Bank	of Record OR ank Information: Bank ABA#:			
* Receiving bank may assess wire fee.				
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