SISC GASB 45 TRUST
DISBURSEMENT/PAYMENT REQUEST

Participating Employer:_____ Employer Identification No (EIN): _____

Requested Payment Date:_____ Payment Amount: $_____

Payee: _____

Payee Contact Name and Phone Number:_____

Form of Payment: (_____) Check – Mail check to this address:_____

(_____) ACH – Routing information:

Bank ABA Number: _____

Bank Name & Address: _____

Bank Acct No. to be Credited: _____

Explanation for Payment (i.e. Oct retiree premium for Elm USD): _____
(up to 36 characters allowed for explanation)

Comments or Special Instructions: _____

The Plan Administrator and Trustee shall be permitted to rely on the written direction of the Participating Employer. The Participating Employer represents, warrants and understands that any distribution shall be made solely for purposes of post-employment Health Insurance benefits as described in the SISC GASB 45 TRUST. The Participating Employer shall indemnify and hold the SISC GASB 45 TRUST and Trustee harmless from any use of Trust funds contrary to such purposes. Notwithstanding the foregoing, the Plan Administrator or Trustee may, in its sole discretion, inspect any documentation and/or circumstances surrounding any such distribution. If you have any questions, please call the SISC office at: (661) 636-4412.

Distribution Directive Reviewed and Approved by
Participating Employer Authorized Signer:

Name and Title (please print): _____

Signature: _____ Date:_____

NOTE: Supporting documentation must be attached (if required as outlined in the SISC GASB 45 Instructions & Guidelines). This form must be received by the SISC office at least 5 business days prior to the requested date of distribution. Additional forms are available at the SISC website: http://sisc.kern.org. Please submit request to:

SISC GASB 45 TRUST, ATTN: Finance Department
Fax: (661) 636-4063
Email: mehanson@kern.org, or cimattern@kern.org
Mail: PO Box 1808, Bakersfield, CA 93303-1808

C: Fred Bayles, Wachovia Securities: (916) 787-1522
Kathy Olson, Union Bank of CA: (415) 273-2490

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