Association of International Agricultural Research Centers 901 North Washington Street, Suite 706 Alexandria, VA 22314 USA Phone 703-548-4540 Fax 703-548-5960 E-mail AIARC@CGIAR.org

OFFSHORE RETIREMENT PLAN WITHDRAWAL FORM

This form is used to withdraw funds from your offshore retirement account. For a full withdrawal from any fund, simply write the word "ALL" in the appropriate blanks. Please keep in mind the following Offshore **Retirement Plan Rules:**

- You may make up to two (2) withdrawals per calendar year; four (4) if already retired.
- Only voluntary funds can be withdrawn while you remain an active employee.
- All funds are available for withdrawal once you terminate or retire.
- A \$5,000 minimum account balance is required to remain in the Plan.
- AIARC must receive documents with your original signature in order to process your withdrawal.
- Withdrawal requests become effective the month following the date of request.
- Withdrawals will take approximately 6-8 weeks from the date of receipt at AIARC.

(Please print) Name Center ID # Surname, first, middle Phone Number: E-mail Address Withdrawal From & Amount: Voluntary **Employer** Equity Equity Fund \$ Fund \$ Fixed Funds: Fixed Funds: US\$ \$ US\$ YEN YEN EURO **EURO** Paper Check \leftarrow CHOOSE ONE \rightarrow Wire Transfer *Please Specify Currency for Withdrawn Funds **Required Information:** (Bank Account Holder) Account Holder Name: Address: (For Wire Transfers only) **Bank Name:** Bank Address: Bank Account #: Bank Code (SWIFT/CHIPS, etc.): Intermediary Bank:

I hereby authorize the above withdrawal from my offshore retirement account. I understand that fees charged by my bank or intermediary banks are not the responsibility of AIARC. I have also signed and attached the required withdrawal release form.

Signature

Intermediary Bank Address:

Bank Code (SWIFT/CHIPS, etc.):_____