



April 05, 2002

**Metavante 401(k) Services**  
1855 Hamilton Avenue  
San Jose, CA 95125-5625  
Tel 408 559 1500  
Fax 408 559 8580  
401kservices.com

██████████  
██████████  
██████████

**CONFIDENTIAL**

RE: Proximation, LLC 401(k) Profit Sharing Plan

Dear J ██████████

You are eligible to receive a distribution of your accumulated vested benefits from the above plan. Enclosed you will find all the necessary forms and instructions to elect the method of distribution of your benefits.

401kservices.com is not a tax advisor. Should you have any questions regarding the taxation of your distribution, please consult your personal tax or financial advisor.

Please return the completed forms to our office for processing within 30 days of receipt.

Sincerely,

A handwritten signature in black ink, appearing to read "Ingrid Norberg", written over a horizontal line.

Ingrid Norberg  
Assistant Distribution Coordinator

Enclosures  
Gary Mueller  
Proximation, LLC

**PARTICIPANT DISTRIBUTION ELECTION**

*(Vested account balance exceeds \$5,000)*

Plan: Proximation, LLC 401(k) Profit Sharing Plan  
2960 Rodeo Park Drive West  
Santa Fe, NM 87505

To: [REDACTED] Social Security Number: [REDACTED]

You are hereby notified that you will receive a distribution from the Plan. We have enclosed a distribution package with this Notice, which explains your rights under the Plan.

**Please print your current address:**

1. Election. I, the undersigned Participant, have read the "Notice to Participant of Distribution Election" and the "Special Tax Notice Regarding Plan Payments" and make the following distribution election: (Choose (a) or (b))

[ ] (a) Qualified Annuity Benefit. I elect to receive the Qualified Annuity Benefit, as explained to me.

[ ] (b) Waiver of Qualified Annuity Benefit. I waive the qualified Annuity Benefit and instead elect: (Choose (1), (2), (3), or (4)). [Note: You must complete the "Information For Direct Rollover or Transfer in-kind" if you select (1) or (2)].

[ ] (1) A direct rollover of my entire Vested Account Balance to the IRA or plan designated in the attached "Information For Direct Rollover."

[ ] (1) A direct rollover of my entire Vested Account Balance to the IRA or plan designated in the attached "Information For Direct Rollover."

[ ] (2) A direct rollover of the following portion of my Vested Account Balance to the IRA or plan designated in the attached "Information For Direct Rollover": \_\_\_\_\_ (not less than \$500), with the balance paid in lump sum (less income tax withholding).

[ ] (3) A lump-sum payment of my entire Vested Account Balance (less income tax withholding).

[ ] (4) Installment payments. Please provide me the necessary form for electing an installment payment method.

If I am less than 100% vested in my Account Balance, I understand (b)(4) is not available and a distribution results in a forfeiture of the nonvested portion of my Account Balance, subject to the repayment/restoration rights explained in the "Notice to Participant of Distribution Election."

2. Marital Status. I am: (check one) [ ] married [ ] not married

Note: If you are married and you elect (b), your spouse must complete the "Spouse's Consent to Waiver of Qualified Annuity Benefit".

3. Execution. Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Participant Signature