Rollover Deposit Form

Associated Bank

Foth & Van Dyke LLC 401(k) Retirement Savings Plan

Instructions:

1. **Important:** Your rollover cannot be invested without receipt of this completed Rollover Deposit Form by Associated. Please ensure that a copy of this form either accompanies the deposit, or is received prior to the rollover funds. (See the bottom of this form for mailing and fax instructions.)

2. Contact the institution holding the funds you wish to rollover to complete any forms the institution may require. **Please provide them with the rollover deposit instructions found at the bottom of this form.**

I. PARTICIPANT INFORMATION (Please print clearly)

____ ______________________
Participant Name Social Security Number

____ ______________________
Address Date of Birth

____ ______________________
City State ZIP Date of Hire

____ ______________________
E-mail Address Date of Participation

____ ______________________
Previous Plan Name / IRA Account Estimated Amount

II. ACCOUNT INFORMATION (Check one box below)

☐ This rollover contribution does not represent contributions classified as Roth.

☐ This rollover contribution includes Roth classified amounts. (Complete taxability information below)

________________Roth Basis Amt ______________Roth Earnings Amt Taxable year Roth deferrals were made 20_____

III. INVESTMENT DESIGNATION (Check one box below)

☐ I have already enrolled in the Foth & Van Dyke LLC 401(k) Retirement Savings Plan and made investment elections. (Your rollover contribution will be invested according to your existing selections.)

☐ I have not yet enrolled in the Foth & Van Dyke LLC 401(k) Retirement Savings Plan and have not yet made any investment elections, or I wish to have my rollover contribution invested differently than the investment elections on file. (Your rollover contribution will be invested as indicated below.)

Important: If you do not select an option, your rollover will be invested according to the elections currently on file. If you did not make a selection, or if you indicated that elections on file should be used, and there are no current elections, the rollover will be invested in the plan's default investment.

III. INVESTMENT DESIGNATION (continued) – **If you are already enrolled in the Foth & Van Dyke LLC 401(k) Retirement Savings Plan, complete only if you want your rollover money invested differently than your current account selections.**

(Indicate a whole percentage for each fund. Percentages containing fractions or decimal points will not be accepted. The total of the percentages invested in all funds must equal 100%.)

________%	PUTNAM STABLE VALUE FUND		ASSET ALLOCATION FUNDS
________%	FIDELITY US BOND INDEX (FXNAX)	________%	AMERICAN FUNDS 2010 TDATE R6 (RFTTX)
________%	MFS EMERGING MARKETS DEBT R6 (MEDHX)	________%	AMERICAN FUNDS 2015 TDATE R6 (RFJTX)
________%	DODGE AND COX STOCK FD (DODGX)	________%	AMERICAN FUNDS 2020 TDATE R6 (RRCTX)
________%	FIDELITY 500 INDEX (FXAIX)	________%	AMERICAN FUNDS 2025 TDATE R6 (RFDTX)
________%	HARBOR CAPITAL APPRECIATION (HNACX)	________%	AMERICAN FUNDS 2030 TDATE R6 (RFETX)
________%	DFA US TARGET VALUE PORT CL I (DFFVX)	________%	AMERICAN FUNDS 2035 TDATE R6 (RFFTX)
________%	VANGUARD SM-CAP INDEX FD ADMIRAL SHS(VSMAX)	________%	AMERICAN FUNDS 2040 TDATE R6 (RFGTX)
________%	LOOMIS SAYLES SMALL CAP GROWTH INSTL FUND (LSSIX)	________%	AMERICAN FUNDS 2045 TDATE R6 (RFHTX)
________%	AMERICAN FUNDS EUROPACIFIC R6 (RERGX)	________%	AMERICAN FUNDS 2050 TDATE R6 (RFITX)
________%	INVESCO DEVELOPING MARKETS FUND (ODVIX)	________%	AMERICAN FUNDS 2055 TDATE R6 (RFKTX)
________%	PIMCO COMMODITY PLUS FUND (PCLIX)	________%	AMERICAN FUNDS 2060 TDATE R6 (RFUTX)
________%	DFA INFLATION-PROTECTED SECURITIES I (DIPSX)	________%	AMERICAN FUNDS 2065 TDATE R6 (RFVTX)

Disclosure: Future transfers and realignments you make will apply to all balances, including the indicated rollover, altering the allocation specified above.

IV. APPROVAL SIGNATURES - ***Incomplete forms may delay the deposit of your contribution.***

I certify that this distribution is not (a) one of a series of substantially equal payments payable over my life or single life expectancy or the joint life or joint life expectancies of myself and my designated beneficiary; (b) one of a series of installment payments payable over 10 years or more; (c) all or part of a required minimum distribution; (d) a distribution due to financial hardship; (e) a return of any excess deferrals, excess contributions, excess aggregate contributions or excess annual additions made to the plan; or (f) a deemed distribution due to a loan default. Finally, I certify that this rollover is being accomplished within 60 days of my receipt of the eligible rollover distribution from my prior employer's eligible qualified retirement plan, or my traditional IRA.

X____ ____________________

Participant Signature **Date**

I certify that the participant is eligible to participate in the Foth & Van Dyke LLC 401(k) Retirement Plan.

X____ ____________________

Plan Administrator Signature **Date**

V. DEPOSIT FUNDS - Your rollover cannot be invested without receipt of this Rollover Deposit Form. Please ensure that a copy of this form either accompanies the deposit or is received prior to the rollover funds.

Check and Form Mailing Instructions:	**Wire Instructions**
Foth & Van Dyke LLC 401(k) Retirement Savings Plan FBO**:** ____________________ *<< Your Name>>* c/o Associated Trust Company Attn: Retirement Plan Services PO Box 1007 Neenah, WI 54957-1007	Associated Bank, N.A. ABA# 075900575 Associated Trust Company Credit to 001429-1449 Foth & Van Dyke LLC 401(k) Retirement Savings Plan FBO**:** ____________________ *<< Your Name>>*