



2009 ARP Provider Change Form

Substitute House Bill No. 535 requires participants in the Ohio Alternative Retirement Plan (ARP) have no more than one provider during a plan year. The Bill allows participants to change providers only at the beginning of a plan year.

Complete the form below only if you want to change your ARP provider. This completed form must be received in Total Compensation & Wellness no later than January 6, 2009. Return this form to Mail Location 0596 or bring to University Hall, Suite 340. The change will be effective January 1, 2009 for monthly-paid employees and December 28, 2008 for bi-weekly paid employees (bi-weekly pay period beginning 12/28/08 and ending 1/10/2009).

Name (please print)		Phone Number
Social Security Number	UC ID	
Street Address		
City	State	ZIP

MY CURRENT ARP PROVIDER IS :

- AIG (VALIC)
- AXA (Equitable Life Assurance Company)
- Great American Life Insurance Company (Brecek & Young)
- ING
- Lincoln National Life Insurance Company (Dougherty & Assoc.)
- Metropolitan Life Insurance Company
- Nationwide Life Insurance Company (Horan Securities)
- Teachers Insurance and Annuity Association (TIAA-CREF)

I WISH TO CHANGE MY ARP PROVIDER TO :

- | | | |
|--------------------------|--|-----------------------|
| <input type="checkbox"/> | AIG VALIC | 1-800-892-5558 X89020 |
| <input type="checkbox"/> | AXA/Equitable Life Assurance Company | 1-800-551-2423 |
| <input type="checkbox"/> | Great American Life Insurance Company | 1-800-789-6771 x11811 |
| <input type="checkbox"/> | ING | 1-800-451-4702 |
| <input type="checkbox"/> | Lincoln National Life Insurance Company | 1-513-745-7007 |
| <input type="checkbox"/> | Metropolitan Life Insurance Company | 1-800-492-3553 x28535 |
| <input type="checkbox"/> | Nationwide Life Insurance Company | 1-800-544-8306 |
| <input type="checkbox"/> | Teachers Insurance and Annuity Association | 1-877-277-6446 |

To officially enroll in the ARP you must complete an application for your chosen provider. If you have not already completed one, applications are available by calling the provider directly. The application must be completed no later than the end of January. Please be aware you may incur charges from your current ARP provider for transferring the monies to your new ARP provider.

I wish to change my ARP provider to the company listed above. I understand the change in ARP provider is irrevocable for the 2009 calendar year.

Signature	Date
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