

DEFERRED COMPENSATION PLAN & NYCE IRA WITHDRAWAL CANCELLATION FORM





Please Print - Black Ink Preferred

This form is used to cancel your distribution/rollover from your 457 or 401(k) account or your withdrawal from your NYCE IRA. This is a time-sensitive request and must be received by the Plan no later than seven business days before the Plan's recordkeeper is scheduled to issue a check. Please return this form to the address below, or fax to (844)299-2362, as soon as possible.

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Submission Instructions

Mail completed form to: DEFERRED COMPENSATION PLAN Bowling Green Station, P.O. Box 93 New York, New York 10274-0093

- OR -

Submit your completed form via email to NEWYRK@VOYAPLANS.cor

Please only include the last 4 digits of your Social Security number,

along with your name and address on all forms.

Forms can also be faxed to 844-299-2362

Office Use Only														
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