

## **Investment Change/Transfer Form**



Section A: General Inform	ation					
Employer (District) Name:						
Employee Name:			Social Security Number:			
Address:		(	City:	State:	Zip:	
Telephone Number: Fax Number:		E	E-mail Address:			
Account balance will <b>only</b> be available once the vesting schedule has been met. To verify your vesting schedule, please refer to your plan highlight.						
Section B: Investment Election for Future Contributions						
AMERICAN UNITED LIFE INS Fixed Account	Gov Res	Intern Intern	ONS: (totals must equestion of the control of the c	lend Street Small & Mid CAP S&P 600 INDE Emerging Markets oping Markets al Value ational Growth & In	EX R3	
American Funds American Balanced     Janus Balanced R/ Balanced (JB)     American Century Strategic – Allocation: Aggressive  Large-Cap Stocks: Large Cap Growth     T Rowe Price Growth Stock  Large-Cap Stocks: Large Cap Blend			Managed Asset Allocation: Managed Asset Allocation  % American Century One Choice 2035  % American Century One Choice 2045  % T. Rowe Price Retirement 2020  f no allocations are indicated or the total allocation percentages do not equal 100%, the total Purchase Payment(s) will be allocated to the Plan's default investment pending allocation instructions from the Owner.			
% American Century Ed Large-Cap Stocks: Large Cap Va	% State Street Equity 500 Index % American Century Equity Growth If n equ					
Mid-Cap Stocks: Mid Cap Blend% PRINCIPAL MIDCAF% Fidelity Advisor Leve	P S&P 400 INDEX R3					
Please indicate in the space provided below to which class(es) of money you wish to apply the investment allocation change. For more information on your Plan's classes or in which class(es) you have an account balance, please refer to your Plan Highlights and account statement.						
I wish to apply the investment alloc	cation change to the following Class(es):					
All Classes						
(please write in the Class Name)						
(please write in the Class Name)						
(please write in the Class Name)						
(please write in the Class Name)						

AMERICAN UNITED LIFE INSURANCE COMPANY I	INVESTMENT OPTIONS: (totals must equal 100%)
Fixed Account% AUL Fixed Interest Account	Small-Cap Stocks: Small Cap Blend% Oppenheimer Main Street Small & Mid Cap % PRINCIPAL SMALLCAP S&P 600 INDEX R3
Fixed Interest/ Cash: Cash% Goldman Sachs MM Gov Res	International Stocks: Diversified Emerging Markets% Oppenheimer Developing Markets
Intermediate – Term Bond% Pioneer Bond A (Intermediate Investment Grade)	International Stocks: International Value% T Rowe Price International Growth & Income
Balanced% Franklin Income% American Funds American Balanced% Janus Balanced R/ Balanced (JB)	International Stocks: International Blend% Oppenheimer International Growth  Managed Asset Allocation: Managed Asset Allocation
	### American Century One Choice 2035  ### American Century One Choice 2045  ### American Century One Choice 2045  ### T. Rowe Price Retirement 2020
Large-Cap Stocks: Large Cap Blend% State Street Equity 500 Index% American Century Equity Growth	If no allocations are indicated or the total allocation percentages do not equal 100%, the total Purchase Payment(s) will be allocated to the Plan's default investment pending allocation instructions from the Owner.
Large-Cap Stocks: Large Cap Value% American Century Equity Income	
Mid-Cap Stocks: Mid Cap Blend% PRINCIPAL MIDCAP S&P 400 INDEX R3% Fidelity Advisor Leveraged Company Stock	
	s) of money you wish to apply the investment allocation change. For more information on to balance, please refer to your Plan Highlights and account statement.
All Classes	
	(please write in the Class Name)
	(please write in the Class Name)
	(please write in the Class Name)
	(please write in the Class Name)
Section D Internet Access for Plan Participant	es e
regarding company retirement plan accounts. Our webs	c. provides Internet access for employee transactions, inquiries and ques tions ite address is <a href="www.midamerica.biz">www.midamerica.biz</a> . Live operator assistance is available Monday 8:30 AM to 6:00 PM Eastern Time at our toll free number (800) 430- 7999.
	nc. does not and cannot make representations or commitments to employees imply provide data received from asset custodians as forwarded to our systems suggestions for continued improvement.
By signature below, I agree that the funds involved and selection is based on my best prudent understanding in	d associated financial risks have been described to me such that the allocation the interest of my retirement funding goals.
Employee Signature	Date

MidAmerica Administrative & Retirement Solutions, Inc. Attn: ADMIN DEPT 402 South Kentucky Ave., Suite 500 Lakeland, FL 33801

Please return this completed form to: