Archdiocese of New Orleans 401(k)

(the "Archdiocese of New Orleans" Plan)
https://ArchdioceseNO.Voya.com

P.O. Box 5166
Boston, MA 02206-5166
1-800-260-0659

ANO Location TRANSFER FORM

Please complete this form for staff transfers from a previous location in Archdiocese to the Current location in the Archdiocese. This form should be completed by the previous location's payroll administrator.

I. 401(k) PARTICIPANT INFORMATION

Last Name	First Name	Middle Initial

EEID	Social Security Number	Date of Birth

Mailing Address (number and street)	City	State	Zip Code

Telephone Number (work)	Telephone Number (home)	Email Address

II. NEW ANO LOCATION INFORMATION (Where you transfer to)

Location Name:	**AN _____**

III. PREVIOUS ANO LOCATION INFORMATION (Where you transfer from)

Location Name:	**AN _____**

- Separation date from previous location: _____.
- Any certification required--- Space to enter Loan or deferral info
- Current 401(k) deferral percentage: _____ %
- Previous Payroll Frequency (Circle One): Monthly (12 paychecks/year) Semi-Monthly (24 paychecks/year) Bi-Weekly (26 paychecks)
- Date of Last paycheck at previous location: _____

Participant's Signature	Date
Site Administrator's Signature	Date

Email/fax completed form to VOYA Plan Administrator and gaining location's payroll office.
Copy the Office of Human Resources.