

## **SISC GASB 45 TRUST**

### **DISBURSEMENT/PAYMENT REQUEST**

Participating Employer: \_\_\_\_\_ Employer Identification No (EIN): \_\_\_\_\_

Requested Payment Date: \_\_\_\_\_ Payment Amount: \$ \_\_\_\_\_

Payee: \_\_\_\_\_

Payee Contact Name and Phone Number: \_\_\_\_\_

Form of Payment: (  ) Check – Mail check to this address: \_\_\_\_\_

(  ) ACH – Routing information:

Bank ABA Number: \_\_\_\_\_

Bank Name & Address: \_\_\_\_\_

Bank Acct No. to be Credited: \_\_\_\_\_

Explanation for Payment (i.e. Oct retiree premium for School District): Monthly Retiree Premium  
*(up to 36 characters allowed for explanation)*

Comments or Special Instructions: \_\_\_\_\_

The Plan Administrator and Trustee shall be permitted to rely on the written direction of the Participating Employer. The Participating Employer represents, warrants and understands that any distribution shall be made solely for purposes of post-employment Health Insurance benefits as described in the SISC GASB 45 TRUST. The Participating Employer shall indemnify and hold the SISC GASB 45 TRUST and Trustee harmless from any use of Trust funds contrary to such purposes. Notwithstanding the foregoing, the Plan Administrator or Trustee may, in its sole discretion, inspect any documentation and/or circumstances surrounding any such distribution. If you have any questions, please call the SISC office at: (661) 636-4654.

**Distribution Directive Reviewed and Approved by**

Participating Employer Authorized Signer:

Name and Title (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: Supporting documentation must be attached (if required as outlined in the SISC GASB 45 Instructions & Guidelines). This form must be received by the SISC office at least 5 business days prior to the requested date of distribution. Additional forms are available at the SISC website: <http://sisc.kern.org>. Please submit request to:**

**SISC GASB 45 TRUST, ATTN: Finance Department**

Email: [narusso@siscschools.org](mailto:narusso@siscschools.org), or  
[mehanson@siscschools.org](mailto:mehanson@siscschools.org)

Mail: PO Box 1808, Bakersfield, CA 93303-1808