

Data Collection

12/05/2024 7:56 am CST

Distribution ✕

Participant Profile

| | |
|----------|----------------------|
| State | <input type="text"/> |
| ZIP Code | <input type="text"/> |

CONTACT INFORMATION

| | |
|---------------|---|
| Phone Number | <input type="text"/> |
| Email Address | <input type="text" value="data@email.com"/> |

EMPLOYMENT INFORMATION

| | | | | |
|------------------------------------|---|------------------------------------|----------------------------------|----------------------------------|
| Date of Hire | <input type="text" value="MM/DD/YYYY"/> | <input type="button" value="📅"/> | | |
| Last Day Worked | <input type="text" value="MM/DD/YYYY"/> | <input type="button" value="📅"/> | | |
| Reason For Distribution | <input type="text" value="Select"/> | | | |
| Hours Worked | <input type="text"/> | | | |
| Current Plan Year for Hours Worked | <input type="text" value="From"/> | <input type="button" value="📅"/> | <input type="text" value="To"/> | <input type="button" value="📅"/> |
| Years of Service for Vesting | <input type="text" value="0"/> | <input type="text" value="As of"/> | <input type="button" value="📅"/> | |

MARITAL STATUS

| | |
|----------------|----------------------|
| Marital Status | <input type="text"/> |
|----------------|----------------------|

PLAN DETAILS

DTS Sample 401(k) Plan

EIN: 12-1234567
CoID:
PN: 001
PlanID: DTS-HRG
1099: Yes

ACCOUNT MANAGER

Account Manager

Email: account@email.com
Phone: [414-555-5555](tel:414-555-5555)
Fax: 414-226-2443

Office Hours:
Mon-Friday 9:00am to 5:00pm CT

ADDITIONAL LINKS

[How To Use This Tool](#)
[FAQs](#)
[Privacy Policy](#)