



degreeofhonor.com

PART 1. 2020 RMD WAIVER ELECTION	
To be completed by the IRA <u>owner</u> to <u>we</u>	aive automatic RMD payout not yet received in 2020.
Annuitant:	Certificate Number:
☐ Waive automatic RMD payout in 20	20 that IRA [CFL/DOH] has not distributed prior to the receipt of this form.
PART 2. SIGNATURE	
Sign, date and return this form only if yo	ou are requesting a <u>waiver</u> of your automatic RMD payout in 2020.
I authorize the waiver of my 2020 RMD until it is processed by Degree of Honor.	described in Part 1 above. I understand that my waiver will not be effective I understand that my automatic RMD payout will resume in 2021.
Print Full Name:	
Social Security Number:	
x	
Signature of IRA Owner	Date (mm/dd/yyyy)

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