



# Invesco Solo 401(k) Successor Plan Administrator Designation Form

Use this form to designate a successor plan administrator for the Invesco Solo 401(k) referenced in section 1.

- The employer/plan administrator/trustee should keep this form on file with the plan's records. **Do not return to Invesco.**

*\*Required*

PLEASE USE BLUE OR BLACK INK

PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS

## 1 | Plan Information

Plan Name

Plan's Tax Identification Number\*

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Mailing Address

City

State

ZIP

## 2 | Designation of Successor Plan Administrator

In the event of my death or incapacitation, I appoint the individual named below as the successor plan administrator for the plan referenced in section 1 for the sole purpose of distributing plan assets and terminating the plan.

Successor Plan Administrator Name

Mailing Address

City

State

ZIP

Successor Plan Administrator's Primary Phone Number

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## 3 | Authorization and Signature

I certify I have informed the individual named above of their designation, and will keep this form on file with the plan's records. In no event shall Invesco Investment Services, Inc. (IIS) be authorized to process a distribution or take any other action with respect to the plan unless IIS has received appropriate documentation (as determined solely by IIS) as to my death or incapacitation.

Plan Administrator's Signature

Date (mm/dd/yyyy)

/ / 

Plan Administrator's Name

**DO NOT SEND TO INVESCO – FOR EMPLOYER USE ONLY**