

Sample Investment Provider Secondary Notification

Date

Investment Provider Name

Address

City, State, Zip

RE: Employer Name 403(b) TSA Plan

Dear _____ [Insert Investment Provider Name]:

_____ [Insert Name of School District] has contracted with _____ [insert name of TPA] to act as third party administrator for the district's 403(b) Plan. The district has adopted a 403(b) Plan Document and entered into a Compliance Services Agreement for these services.

You recently received a letter from the contract administrator with instructions and the effective date that _____ [insert name of TPA] will assume compliance activities for the district.

Additionally, your company was provided a copy of the Plan Document and the Investment Provider Agreement for the plan. To date, your company has not responded to the above-referenced letter. As previously requested, your company must execute the Investment Provider Agreement by the requested date in order to maintain a payroll slot with the district plan.

Please direct all inquiries with regard to our district's 403(b) Plan and TPA services to [insert name of TPA].

TPA

Address

City, State and Zip

Telephone Number

E-mail address

This letter is authorization for your company to communicate with _____ [insert name of TPA] with regard to all matters related to the district plan. Please retain this letter with your records. Thank you in advance for your prompt attention to these matters.

Sincerely,

Name

Title

District