

Adopting Employer: Transmittal of Deposit



Adopting Employer Name _____

Record Keeper Number _____

Task Reference Number _____
Plan Number 894550

Overnight Delivery Tracking Number _____
(If submitting a check)

Total Funding Amount Due _____

Type of Deposit – Check One:

Prior Plan Funding Plan Year _____

Missed Deferrals Plan Year _____

Check Payment Method Option Below for The Source Type(s) Specified Above:

Option 1 - Company Check Made Payable to: Voya Financial Attn: ADP TotalSource Plan Administration

Regular Mail

Voya Institutional Plan Services
ADP TotalSource Plan Administration
One Orange Way
Windsor, CT 06095

Overnight Mail

Voya Institutional Plan Services
ADP TotalSource Plan Administration
One Orange Way
Windsor, CT 06095

Option 2 - Wire Transfer:

Wire Transfer Instructions:

State Street Bank and Trust Company
225 Franklin Street Boston MA, 02110
ABA #: 011000028
Account #: 1027-657-4
Account Name: Voya Financial as TTEE FBO ADP TotalSource

*Fax this form to: 888-406-1861 one day in advance of the wire transfer in order to process.
If your wire or required form is missing from your submission, there will be a delay in processing.*