

**DIRECT PAYMENT REQUEST**

Complete this form to direct us to pay the college for qualified higher education expenses on your student's account.

Account Information			
Account Number		Account Owner Name	
Student Beneficiary Name		Account Owner Phone Number	
Academic Information			
<i>School Contact Information</i>		<i>Dates of Attendance</i>	
School Name		<i>Choose only one academic year and term per Direct Payment Request.</i>	
Address			
City, State, Zip			
Website			
<input type="checkbox"/> Winter 2019/20 <span style="margin-left: 100px;"><input type="checkbox"/> Spring 2020</span>			
<input type="checkbox"/> Summer 2020 <span style="margin-left: 100px;"><input type="checkbox"/> Fall 2020</span>			
Payment Information		When does the payment need to reach the school ( <i>allow 2 weeks for processing</i> )? _____	
<b>Payment Type and Amount</b>		<input type="checkbox"/> <b>Tuition (and/or fees)</b>	\$
<input type="checkbox"/> <b>Room &amp; Board</b> ( <i>The student must attend at least half time and be living <u>on-campus</u> to qualify for the direct payment of Room and Board expenses. The amount may not exceed the Room and Board allowance calculated by the college in its Cost of Attendance budget. For off-campus Room and Board, please complete a Reimbursement Request.</i> )			\$
<b>Total Amount Requested*</b>			\$
*To calculate the number of units you are using, divide the total amount requested by the current payout value.			
Transaction Authorization – Agree to the terms and conditions below and authorize GET to perform the transaction			
<ul style="list-style-type: none"> <li>I am the designated Account Owner on this GET account.</li> <li>In compliance with the Family Educational Rights and Privacy Act of 1974 (FERPA), I authorize the <b>Guaranteed Education Tuition Program</b> and the college listed above to disclose to each other personally identifiable information, including the Student Beneficiary's Social Security number and any other account information necessary to make a distribution from my GET account.</li> <li>This distribution is to pay for qualified higher education expenses as defined by Internal Revenue Code Section 529. I understand that I am responsible for determining whether the expenses for which these funds are used are qualified or non-qualified, and for reporting the 10 percent of earnings penalty for non-qualified distributions on my federal tax return. Qualified higher education expenses include the costs of tuition, fees, room and board, books, supplies, computers, and equipment required for the enrollment or attendance at an eligible institution. IRS rules on qualified and non-qualified higher education expenses are available at <a href="http://www.irs.gov/pub/irs-pdf/p970.pdf">www.irs.gov/pub/irs-pdf/p970.pdf</a></li> <li>It is my responsibility to monitor the available units in my GET account as well as the balance owed on my college account and the tuition due dates.</li> </ul>		<ul style="list-style-type: none"> <li>I have verified the payment amount due.</li> <li>I understand that charges not covered by GET funds are my responsibility and that, at the discretion of the college, late fees may accrue on past due charges.</li> <li>If the student withdraws from college, non-refundable fees and tuition owed to the college will be paid from GET distributions.</li> <li>Overpayments to colleges due to withdrawal or dropped classes will not be returned to your GET account. The funds must be recontributed to a 529 plan within 60 days of the date of the refund to avoid tax consequences.</li> <li>Requests for distribution may not exceed the balance remaining in the Student Beneficiary's GET account for that academic year.</li> <li><b><u>The information provided on this form is true and correct to the best of my knowledge and belief.</u></b></li> </ul>	
<b>Account Owner</b> Signature _____		Date _____	

Send to: Guaranteed Education Tuition, PO Box 43450, Olympia, WA 98504-3450 or 360.704.6200 (Fax)