The following are non-electronic delivery methods to provide plan participants with copies of SPDs/SPD Wrap or Employee Notification Documents.

Non-Electronic Methods of Delivery:

- **U.S. Mail:** Material distributed through the mail may be sent by first, second, or third-class mail. However, distribution by second or third-class mail is acceptable only if return and forwarding postage is guaranteed and address correction is requested. Any material sent by second or third-class mail which is returned with an address correction shall be sent again by first-class mail or personally delivered to the participant at his or her worksite. For distribution of documents/materials in a format other than paper such as electronic storage devices including CD and Flash/memory stick, consent must be obtained from employees of their ability to access such devices for viewing of materials. See **Attachment A** below "**Acknowledgment of Material Distribution Format**."
- **Hand Delivery:** If using a hand delivery method, consider obtaining a receipt from participants of the notice delivery. It is not acceptable to merely place copies of the material in a location frequented by participants. See sample **Attachment B** below "**Acknowledgment of Receipt of Important Documents**."
- **Periodical/Company Publications:** It is acceptable to deliver documents as a special insert in a periodical distributed to employees such as a union newspaper or a company publication, if the distribution list for the periodical is comprehensive and up-to-date. It must also show a prominent notice on the front page of the periodical advising readers that the issue contains an insert with important information about rights under the plan. If some participants and beneficiaries are not on the mailing list, a periodical must be used in conjunction with other methods of distribution.

Documentation: Regardless of the distribution method used, the employer should always retain evidence of the notice being given, including a copy of the notice/s, the date provided, and to whom it was provided.

These notices and any other relevant Plan Documents or Notices should be made available to employees upon request at no cost. For purposes of section 104(b)(4) of the Act, materials furnished upon written request shall be mailed to an address provided by the requesting participant or beneficiary or personally delivered to the participant or beneficiary.

ATTACHMENT A

Acknowledgment of Material Distribution Format

Under the Employee Retirement Income Security Act of 1974 (ERISA) and related regulations , (insert company name) is required to provide to all benefit participants a Summary Plan Description (SPD) and supporting documents for all benefits that describe key provisions of the plan(s).
[Insert Company name] will mail or hand-deliver to you a copy of these documents. To reduce the number of printed documents, [Insert company name] would like to provide alternative formats for delivery of these documents. Indicate below your preferred delivery method:

- ☐ PDF documents saved to a mass storage device like a memory stick
- ☐ PDF documents saved to CD-R (compact disk-Read Only Memory)

I consent to the alternative media option selected above for disclosure of all Employee Benefit notices, including Summary Plan Descriptions, plan documents and plan amendments.

I understand that I have the right to receive paper copies of all Employee Benefit notices, including Summary Plan Descriptions and plan amendments, upon request at no additional charge. I also confirm that I have the ability and the necessary equipment and software to access the format selected in order to view and print documents.

Employee Name (Printed) Employee Signature

_____ _____

Date

_____

ATTACHMENT B

Sample Acknowledgment of Receipt of Important Documents

(Optional, insert Company name and/or Logo)

I, the undersigned employee, acknowledge receipt of the following documents from [Insert company]:

1. Summary Plan Descriptions and copies of relevant component plan documents for applicable benefit programs.
2.
3.

_____ _____

Employee Signature Date

_____

Employee Name Printed