

STATE OF LOUISIANA DEFERRED COMPENSATION PLAN 9100 Bluebonnet Centre Blvd., Suite 203 Baton Rouge, LA 70809 Phone: (225) 926-8082

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HARDSHIP COMMITTEE REPORT

Thursday, January 3, 2019

PERSONAL AND CONFIDENTIAL

THE HARDSHIP COMMITTEE MEETING LOUISIANA DEFERRED COMPENSATION COMMISSION

Thursday, January 3, 2019, 8:15 a.m. 9100 Bluebonnet Centre Blvd., Suite 203, Baton Rouge, Louisiana

Members Present:

Kent LaPlace, Retired Participant Member

Ben Huxen, Executive Director/General Counsel, Municipal Police Employees' Retirement System Reta McFarland, Retired Participant Member

Others Present:

Susan Allsup, Field Administrative Support, Baton Rouge Empower Retirement

APPLICATIONS REVIEWED

<u>Case No. 18-05-46:</u> Participant is requesting a partial distribution in the amount of \$3,300 of his account balance of \$13,323 for loss of wages.

The Hardship Committee approved a partial distribution in the amount of \$3,300 based on documentation submitted.

<u>Case No. 19-01-01:</u> Participant is requesting a partial distribution in the amount of \$1,100 of her account balance of \$1,116.96 for medical expenses.

The Hardship Committee approved a partial distribution in the amount of \$1,100 based on documentation submitted.

<u>Case No. 19-01-02:</u> Participant is requesting a partial distribution in the amount of \$1,200 of her account balance of \$1,235.62 for loss of wages.

The Hardship Committee approved a partial distribution in the amount of \$1,200 based on documentation submitted.

<u>Case No. 19-01-03:</u> Participant is requesting a full withdrawal of her account balance of \$1,108.49 for medical expenses.

The Hardship Committee approved a full distribution in the amount of \$1,108.49 based on documentation submitted.

Case No. 19-01-04: Participant is requesting a full withdrawal of her account balance of \$11,373.66 for mortgage payments that are in foreclosure.

The Hardship Committee approved a full distribution in the amount of \$11,373.66 based on documentation submitted.

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<u>Case No. 19-01-05:</u> Participant is requesting a partial distribution in the amount of \$16,000 of her account balance of \$17,465.14 for medical expenses and loss of wages.

The Hardship Committee approved a partial distribution in the amount of \$16,000 based on documentation submitted for medical expenses and loss of wages.

Date Accepted	Susan Allsup, Field Administrative Support
Date Accepted	Virginia Burton, Secretary