

Empower
PO Box 173764
Denver, CO 80217-3764



Month Day, Year

Plan Number: [REDACTED]
Plan Name: State of South
Carolina 457 Deferred
Compensation Plan and
Trust

RE: Plan Loan Payment Coupons

Enclosed are your Plan loan payment coupons. Please submit your loan payments to be received by the due date specified.

If you have any questions, please contact our Client Service Department at 1-877-457-6263.

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FOR YOUR RECORDS

PAYMENT: 10

DATE: _____

CHECK: _____

AMOUNT: \$ _____

LOAN PAYMENT COUPON

Return a separate coupon for each payment.

Name _____

Loan Number (also include on check) _____

Check must be for exact loan payment amount.

Make check payable to:

Mail to:

DUE DATE

01-SEP-2023

PAYMENT AMOUNT

Plan Number

Individual ID

FOR YOUR RECORDS

PAYMENT: 11

DATE: _____

CHECK: _____

AMOUNT: \$ _____

LOAN PAYMENT COUPON

Return a separate coupon for each payment.

Name _____

Loan Number (also include on check) _____

Check must be for exact loan payment amount.

Make check payable to:

Mail to:

DUE DATE

01-OCT-2023

PAYMENT AMOUNT

Plan Number

Individual ID

FOR YOUR RECORDS

PAYMENT: 12

DATE: _____

CHECK: _____

AMOUNT: \$ _____

LOAN PAYMENT COUPON

Return a separate coupon for each payment.

Name _____

Loan Number (also include on check) _____

Check must be for exact loan payment amount.

Make check payable to:

Mail to:

DUE DATE

01-NOV-2023

PAYMENT AMOUNT

Plan Number

Individual ID

FOR YOUR RECORDS

PAYMENT: 13

DATE: _____

CHECK: _____

AMOUNT: \$ _____

LOAN PAYMENT COUPON

Return a separate coupon for each payment.

Name _____

Loan Number (also include on check) _____

Check must be for exact loan payment amount.

Make check payable to:

Mail to:

DUE DATE

01-DEC-2023

PAYMENT AMOUNT

Plan Number

Individual ID