

**PEAK OILFIELD SERVICE COMPANY 401(K) PLAN**  
**MARITAL STATUS CERTIFICATION or SPOUSAL CONSENT FORM**

**Please return this form to:** Merrill Lynch, GES Benefits Administration Services  
PO Box 30447  
New Brunswick, NJ 08989-0447

Unmarried Participants **ONLY**, may fax form to (609) 274-0332.

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**Unmarried Participant Information** Note: If you are legally separated or abandoned, you are treated as unmarried, and should complete this section.

Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

**Certification:**

I hereby represent that I am *not* legally married, or that I am legally separated or abandoned.

\_\_\_\_\_  
Signature of Participant

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**Married Participant Information**

Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

**Spousal Consent: If you are married, you will *not* be entitled to a loan without your spouse's consent on this form. Please check appropriate box below.**

**LOAN REQUEST:** I hereby represent that I am legally married to the Participant named above, and I hereby consent to the **loan request** made by the Participant under the Plan.

I understand that if my spouse fails to repay the loan or otherwise defaults under the loan, the effect of such failure to pay or default will be the reduction of my spouse's account under the Plan. I acknowledge that this means I could be waiving rights to survivor benefits that I may be entitled to at a later date.

**DISTRIBUTION REQUEST:** I hereby represent that I am legally married to the Participant named above, and I hereby consent to the **distribution request** made by the Participant under the Plan.

\_\_\_\_\_  
Printed Spousal Name

\_\_\_\_\_  
Signature of Spouse

**Notarization for Married Participants - (Notarized forms cannot be faxed.)**

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public