

**Acknowledgment of Receipt for the
RUSH COUNTY PLAN YEAR 2024-2025
Summary Plan Description**

Each plan participant must acknowledge their receipt of the Welfare Benefit Plan Summary Plan Description by filling in the information and signing below. Please return to RUSH COUNTY.

I _____ (name of plan participant)
acknowledge receipt of the Rush County Plan Year 2024-2025 Summary Plan
Description.

Signed: _____

Date: _____