



DISTRIBUTION FORM

1 Bank Plaza, Wheeling, WV 26003
1-800-864-1013

Name on Account (First, Initial, and Last)

Social Security Number (Tax ID Number)

Account Number

Date of Birth

Choose Option A or Option B below:

Option A - Lump Sum Distribution (A single payment of all, or a portion of your account.)

TYPE OF LUMP SUM DISTRIBUTION

- Liquidate entire account (all funds)
- Pay Dividends & Capital Gains Only
- Distribute Shares In Kind

- Partial Distribution (Indicate funds to liquidate and amount, below.)

Total Amount of Partial Distribution

WesMark Growth Fund	_____
WesMark SmallCompany Growth Fund	_____
WesMark Balanced Fund	_____
WesMark Government Bond Fund	_____
WesMark West Virginia Municipal Bond Fund	_____

Option B - Periodic or "Systematic Withdrawals" (Payments made on a regular schedule)

I hereby instruct WesMark Funds to distribute the balance of my WesMark Funds in systematic withdrawal payments. I understand that the election of this option does not guarantee satisfaction of the IRS's minimum distribution requirements for IRA accounts and that I should continue to monitor the total amounts actually distributed to me each year. My payments should be taken as directed below:

Frequency: Monthly Quarterly Semi-Annual Annual

Beginning Date (mm/dd/yyyy):

Payments Calculated as Follows:

- Equal Payments of:
- Payments to result in the depletion of my account over my life expectancy. (IRA Only)
- Payments to result in the depletion of my account over the joint life expectancy of myself and my beneficiary. (IRA Only)

My beneficiary's Birth Date is (mm/dd/yyyy) IRA Only:

SOURCE OF SYSTEMATIC WITHDRAWALS

- Pro Rata from all funds
- Specific Percentage from each fund (specify percentages to right - must equal 100%)

WesMark Growth Fund	_____
WesMark SmallCompany Growth Fund	_____
WesMark Balanced Fund	_____
WesMark Government Bond Fund	_____
WesMark West Virginia Municipal Bond Fund	_____

REASON FOR DISTRIBUTION (IRAs Only - Required for IRA Tax Reporting)

- A. Normal Distribution (over age 59 1/2)
- B. Disability
- C. Rollover to Another Plan

- D. Excess Contribution for (year)
- E. Premature Distribution* (See Below)
- F. Death of Account Owner
- Other _____

*I am aware that, if I am under the age of 59 1/2 and taking a distribution, I will generally be subject to an IRS assessed penalty tax on my distribution, in addition to ordinary income taxes.

METHOD OF DISTRIBUTION

If you would like to have your distribution(s) sent via Automated Clearing House (ACH) to your bank account, and your bank account is not already linked to your WesMark Funds account, you must also complete the ACH Authorization Form and attach it to this form.

- Check to Address of Record
- Check to Alternate Address* (Complete Special Instructions)
- In Kind Transfer to New Account*
- ACH to Bank (Instructions on File)
- Check Payable to Alternate Payee* (Complete Special Instructions)

*A Signature Guarantee is required for all distributions to alternate payee or sent to an alternate address (see Special Instructions below).

INCOME TAX WITHHOLDING (IRAs Only)

Distribution from your WesMark Funds IRA will be subject to federal income tax withholding (at rate of 10%) unless you elect not to have withholding apply to your withdrawal by checking the box below. You will, however, remain liable for payment of Federal Income Tax on the taxable portion of your withdrawals. You may also be subject to tax penalties under the estimated tax payment rules if your payments of estimated tax and withholding, if any, are not adequate.

I do not want to have Federal Income Tax withheld from my IRA distribution Please withhold _____ %

SPECIAL INSTRUCTIONS (Signature Guarantee Required)

- Check Payable to Other than Account Owner
- Send Check to Alternate Address
- In Kind Transfer (See Transfer/Rollover Form)

Payable to:

Street Address:

City, State, Zip:

SIGNATURE

Taxpayer Identification Number Certification

Under the penalties of perjury, I certify the following:

1. I certify that the number shown on this form is my correct taxpayer identification number.
2. I am not subject to back-up withholding because I have not been notified that I am subject to back-up withholding as a result of a failure to report interest and dividends, or the Internal Revenue Service has notified me that I am no longer subject to back-up withholding.

Check box if you have received IRS notification that you ARE subject to back-up withholding.

ACCOUNT OWNER SIGNATURE

DATE (mm/dd/yyyy)

SIGNATURE GUARANTEE

MAIL TO:

**WESMARK FUNDS
1 BANK PLAZA
WHEELING, WV 26003**

**FOR ASSISTANCE, CALL WESMARK SHAREHOLDER
SERVICES
1-800-864-1013**

A Signature Guarantee is designed to protect you and the Funds against fraudulent activity by unauthorized persons.