



DIRECT ROLLOVER REQUEST

The term IRA will be used below to mean Traditional IRA and Roth IRA, unless otherwise specified.

RECIPIENT'S NAME AND ADDRESS <i>(Individual requesting the direct rollover)</i>			EMPLOYER'S NAME AND ADDRESS											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;">Recipient's Social Security Number</td> <td style="width: 33%; padding: 5px;">Recipient's Date of Birth</td> <td style="width: 33%; padding: 5px;">Recipient's Home Phone</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table>			Recipient's Social Security Number	Recipient's Date of Birth	Recipient's Home Phone				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 5px;">Plan Name</td> <td style="width: 30%; padding: 5px;">Phone Number</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table>		Plan Name	Phone Number		
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DIRECT ROLLOVER INSTRUCTIONS

Directly roll over all or part of my plan balance to my IRA, Inherited IRA, Qualified Retirement Plan, 403(b) Plan, or 457(b) Plan in the manner listed below. Please make a check payable as follows. **NOTE:** Complete one of the following applicable options. If more than one option applies, complete a separate form per transaction.

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px;">OPTION ONE</td> <td style="padding: 5px;">Traditional IRA</td> </tr> <tr> <td colspan="2" style="padding: 5px;"> _____ (Name of Accepting Organization) as <input type="checkbox"/> Trustee <input type="checkbox"/> Custodian of the _____ IRA. _____ (Name of IRA Holder) </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> CAUTION: Do not place the assets in a SIMPLE IRA or Coverdell Education Savings Account. Roth elective deferrals may not be rolled over to a Traditional IRA. </td> </tr> </table>	OPTION ONE	Traditional IRA	_____ (Name of Accepting Organization) as <input type="checkbox"/> Trustee <input type="checkbox"/> Custodian of the _____ IRA. _____ (Name of IRA Holder)		CAUTION: Do not place the assets in a SIMPLE IRA or Coverdell Education Savings Account. Roth elective deferrals may not be rolled over to a Traditional IRA.		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px;">OPTION TWO</td> <td style="padding: 5px;">Roth IRA</td> </tr> <tr> <td colspan="2" style="padding: 5px;"> _____ (Name of Accepting Organization) as <input type="checkbox"/> Trustee <input type="checkbox"/> Custodian of the _____ Roth IRA. _____ (Name of Roth IRA Holder) </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> CAUTION: A rollover of pretax assets from an eligible retirement plan to a Roth IRA will result in those amounts being included in your taxable income. </td> </tr> </table>	OPTION TWO	Roth IRA	_____ (Name of Accepting Organization) as <input type="checkbox"/> Trustee <input type="checkbox"/> Custodian of the _____ Roth IRA. _____ (Name of Roth IRA Holder)		CAUTION: A rollover of pretax assets from an eligible retirement plan to a Roth IRA will result in those amounts being included in your taxable income.					
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ASSET HANDLING INSTRUCTIONS

Asset Description	Quantity or Amount in Plan	Quantity or Amount to be Rolled	Liquidate Immediately	Directly Roll Over in Kind
1.			<input type="checkbox"/>	<input type="checkbox"/>
2.			<input type="checkbox"/>	<input type="checkbox"/>
3.			<input type="checkbox"/>	<input type="checkbox"/>
4.			<input type="checkbox"/>	<input type="checkbox"/>

REQUIRED MINIMUM DISTRIBUTION RESTRICTION

If this rollover is being made during or after the first year for which you must take a required minimum distribution, you may not roll over any distribution which would constitute a required minimum distribution from the distributing plan. **NOTE:** Please check with your plan administrator for more information.

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