

Account Transfer Form

(Please use a separate form for each account you transfer)

1 TradePMR Account Information	
Account Number	Rep Code
Account Title	
Tax ID/SSN	Tax ID/SSN
Non-Retirement Account Type <input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Trust <input type="checkbox"/> Custodian <input type="checkbox"/> Estate <input type="checkbox"/> Corporate <input type="checkbox"/> Other: _____	
Retirement Account Type <input type="checkbox"/> Roth <input type="checkbox"/> SEP IRA <input type="checkbox"/> Coverdell <input type="checkbox"/> Beneficiary IRA <input type="checkbox"/> Rollover IRA <input type="checkbox"/> Traditional IRA <input type="checkbox"/> Qualified <input type="checkbox"/> 401(k) <input type="checkbox"/> SIMPLE IRA <input type="checkbox"/> Other: _____	

2 Delivering Firm Account Information	
Account Number	
Name of Financial Institution	
Firm Clearing #: (If known)	
Non-Retirement Account Type <input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Trust <input type="checkbox"/> Custodian <input type="checkbox"/> Estate <input type="checkbox"/> Corporate <input type="checkbox"/> Other: _____	
Retirement Account Type <input type="checkbox"/> Roth <input type="checkbox"/> SEP IRA <input type="checkbox"/> Coverdell <input type="checkbox"/> Beneficiary IRA <input type="checkbox"/> Rollover IRA <input type="checkbox"/> Traditional IRA <input type="checkbox"/> Qualified <input type="checkbox"/> 401(k) <input type="checkbox"/> SIMPLE IRA <input type="checkbox"/> Other: _____	

A complete copy of your most recent account statement (dated within 90 Days) is required for this form to be processed.

3 Transfer Instructions	
Select Only One Option for a Transfer or Liquidation (Section A through E)	
<input type="checkbox"/> A. Entire Account Transfer (check one only) Some firms, including all ACAT eligible firms, may not accept this form to complete liquidations. Contact delivering firm to perform liquidation prior to submitting this request, then select the 'Transfer - all assets in kind' option. <input type="checkbox"/> Transfer all assets in kind <input type="checkbox"/> Liquidate all assets and transfer proceeds* <input type="checkbox"/> Liquidate only assets listed in the Asset Listing in Section 4 and transfer proceeds and all remaining assets in kind.*	<input type="checkbox"/> D. Certificate of Deposit Liquidation (CD) (check one only) <input type="checkbox"/> Upon Maturity – the maturity date is _____ (submit 4 weeks before maturity date) <input type="checkbox"/> Immediately – I acknowledge there may be a penalty and/or surrender charge for a full liquidation.
<input type="checkbox"/> B. Partial Account Transfer - Transfer assets or proceeds as listed in Section 4.* *Liquidations not applicable for ACAT eligible accounts.	<input type="checkbox"/> E. Annuity (check one only) CONTRACT NUMBER – _____ <input type="checkbox"/> Penalty-free amount only <input type="checkbox"/> Immediately – I acknowledge there may be a penalty and/or surrender charge for a full liquidation. <input type="checkbox"/> Percent or Amount: _____ (if not marked, liquidate all.)

4 Asset Listing							
Asset Description	Symbol/CUSIP	Number of Shares	Transfers	Mutual Fund Account Number (if Direct at the Fund)	Mutual Fund Capital Gains Option (select one)	Mutual Fund Dividends Option (select one)	
							<i>Defaults to 'Reinvest'</i>
1. Cash \$							
2		<input type="checkbox"/> All <input type="checkbox"/> _____	<input type="checkbox"/> In-Kind <input type="checkbox"/> Liquidate		<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	
3		<input type="checkbox"/> All <input type="checkbox"/> _____	<input type="checkbox"/> In-Kind <input type="checkbox"/> Liquidate		<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	
4		<input type="checkbox"/> All <input type="checkbox"/> _____	<input type="checkbox"/> In-Kind <input type="checkbox"/> Liquidate		<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	
5		<input type="checkbox"/> All <input type="checkbox"/> _____	<input type="checkbox"/> In-Kind <input type="checkbox"/> Liquidate		<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	
6		<input type="checkbox"/> All <input type="checkbox"/> _____	<input type="checkbox"/> In-Kind <input type="checkbox"/> Liquidate		<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	
7		<input type="checkbox"/> All <input type="checkbox"/> _____	<input type="checkbox"/> In-Kind <input type="checkbox"/> Liquidate		<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	
8		<input type="checkbox"/> All <input type="checkbox"/> _____	<input type="checkbox"/> In-Kind <input type="checkbox"/> Liquidate		<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Cash	

5 Authorization to Change Registration - IF APPLICABLE

Complete this section if the information listed in Section 1 is different than the account information at the Delivering Firm.

By completing this section, you are authorizing a transfer between unlike account registrations and ownership. Not available for retirement accounts.

Note: The Delivering Firm may require additional paperwork to transfer between unlike account registrations.

Delivering Firm Account Title	Delivering Firm Social Security Number/Tax ID
Special Instructions/Additional Information:	
<i>Please include supporting documentation, for example: Marriage Certificate, Death Certificate, Driver's License, etc.</i>	
I understand and accept the change of registration and ownership and hold First Clearing, LLC and the delivering firm harmless for acting on the above instruction. This may not be applicable in all cases.	

6 Client Instructions to the Delivering Firm

Client Instructions to Delivering Firm

If this account is a qualified retirement account, I have amended the applicable plan so that it names First Clearing, LLC as successor custodian. Unless otherwise indicated in the instructions above, please transfer all assets in my account.

I understand that to the extent any assets in my account are not readily transferable with or without penalties, such assets may not be transferred within the time frames required by NYSE Rule 412 or similar rule of FINRA or other designated examining authority. I authorize you to liquidate any non-transferable proprietary money market fund assets that are part of my account and transfer the resulting credit balance. I authorize you to deduct any outstanding fees due from the credit balance in my account. If my account does not contain a credit balance or if the credit balance in the account is insufficient to satisfy any outstanding fees due you, I authorize you to liquidate the assets in my account to the extent necessary to satisfy any obligation.

If certificates or other instruments in my account are in your physical possession, I instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable the successor custodian to transfer them in its name for the purpose of sale, when and as directed by me. I understand that upon receiving a copy of this transfer instruction, you will cancel all open orders for my account on your books. I affirm that I have destroyed or returned to you credit/debit cards and/or unused checks issued to me in connection with my securities account. I understand that you will contact me with respect to the disposition of any assets in my securities account that are non-transferable.

- I understand that fractional shares may not transfer in kind and may be required to be liquidated to complete a full transfer.
- When applicable, I authorize the delivering firm to discontinue all account management agreements immediately. The client will have the sole responsibility for investment decisions with respect to the securities, cash and other assets in the client's account until the client hires a new investment manager.
- PLEASE NOTE:** (Applicable to retirement accounts only) Regular IRA contributions can be commingled with rollover/direct rollover contributions. Please consult with a tax advisor to determine the best option for your situation. I understand and acknowledge that commingling may preclude me from rolling funds from my IRA to another qualified plan or 403(b) plan.

Cost Basis Request

I/We hereby request the delivering firm to provide First Clearing, LLC (the receiving firm) the cost basis information it has on its records for each asset covered by this Client Account Transfer Form. I/We understand and acknowledge that such information may be used by First Clearing, LLC for tax reporting purposes. I/We agree that I/we will be solely responsible for the accuracy of such information provided by the Delivering Firm. I/We will defend and hold First Clearing, LLC and the Delivering Firm harmless any and all claims, liabilities, damages, taxes, actions, including attorney fees, resulting from compliance with this request and relating to First Clearing, LLC using such cost basis information for tax reporting purposes.

Age 70½ Reminder - THE FOLLOWING APPLIES ONLY TO A RETIREMENT ACCOUNT TRANSFER.

If you will turn age 70½ this year, or you are already over age 70½, please be reminded that you must withdraw your required minimum distribution amount by the deadline. The deadline for individuals who turn 70½ this year is April 1st of next year and for all others, the deadline is December 31st of this year. The IRS penalty for under distribution of the mandatory amount by the deadline is 50%. In order to calculate the required amount for this year, the value of this IRA on December 31st of last year will be needed. In addition, required minimum distributions are not eligible for rollover.

Auction Rate Securities: Account Transfer Acknowledgement

You understand and agree to the following in connection with the auction rate securities held in your account:

- Your auction rate securities were purchased prior to the transfer of your account to us. As a result, we are not responsible or liable for any prior recommendations or advice with respect to these securities nor are we under any obligation to provide you with any investment recommendation or advice with respect to the disposition or continued holding of these securities in your account following the transfer of your account.
- You also understand and agree that we are not under any obligation to you (i) to provide loans under margin agreements or otherwise secured in whole or part by the auction rate securities in your account, (ii) to purchase or continue to purchase any auction rate securities in periodic rate setting auctions or in secondary market transactions, or (iii) to provide liquidity for such securities. Many auctions for these securities are in failed status meaning that holders of these securities are not able to sell these securities in the periodic rate setting auctions or in secondary market transactions and as a result, liquidity for these securities currently is greatly impaired. We provide no assurance that you will be able to sell or otherwise dispose of these securities following the transfer of your account to us. You understand that we take actions in connection with other customers that we do not offer you in connection with your auction rate securities.

7 Authorized Signatures

Primary Account Holder Signature	Print Name	Date
Secondary Account Holder Signature	Print Name	Date

Custodian Acceptance – Firm Use Only

Be advised that First Clearing, LLC accepts appointment as Successor Custodian.

<input type="text"/>	<input type="text"/>
Successor Custodian Signature	Date
<input type="text"/>	<input type="text"/>
Contact	Phone

Signature Guarantee

--