



Account Number _____

Rep ID _____ Alternate Branch _____

ACCOUNT TRANSFER FORM

BROKER CHANGE ONLY (OUTSIDE TRUSTEES)

Receiving Firm Clearing Number	0235	Carrying Firm Clearing Number
Account Tax Identification/Social Security Number		Carrying Firm Account Number
Account Title		Carrying Firm Name

Account Type (check one) *Note: A Direct Rollover is a distribution which is reportable to the IRS.

Retail Accounts:

- Single Corporate Custodial Other
- Joint Estate Trust

Retirement Accounts:

- IRA Simple IRA Roth IRA
- Direct Rollover* Qualified 401(k)

GENERAL TERMS/AGREEMENT OF YOUR ACCOUNT TRANSFER

Unless otherwise indicated in the instructions below, please transfer all assets in my account to RBC Correspondent Services, a division of RBC Capital Markets Corporation ("RBC CM"), Member NYSE/FINRA/SIPC, without penalties. I understand that to the extent any assets in my account are not readily transferable, such assets may not be transferred within the time frames required by rules of the Financial Industry Regulatory Authority or other designated examining authority.

Unless otherwise indicated in the instructions below, 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 to RBC CM. I authorize you to deduct any outstanding fees due you 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 the obligation. If certificates or other instruments in my account are in physical possession, I instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable RBC CM 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 understand that you will contact me with respect to the disposition of any assets in my account that are non-transferable.

COMPLETE ONLY FOR NON-ACAT OR PARTIAL TRANSFERS

In accordance with applicable regulatory requirements, all eligible transfers will be completed through the automated transfer system. If this transfer is deemed eligible, the assets in this account will transfer in kind. If this transfer is deemed ineligible, the account will be manually transferred to the appropriate financial institution or broker-dealer. Please indicate the appropriate transfer options to be utilized if this account needs to be manually transferred:

Carrying Firm Address:

- Transfer all securities in-kind
- Liquidate all assets and send proceeds
- Re-Register Mutual Funds
- Forward proceeds upon MATURITY date of:
- Liquidate CD/Annuity IMMEDIATELY and send proceeds. I am aware of and acknowledge the penalty that I will incur from early withdrawal.

Check one of the following boxes and indicate assets below.

- Partial, transfer only the following assets:
 - 1.
 - 2.
 - 3.
- Partial liquidation prior to full transfer:
 - 1.
 - 2.
 - 3.

Please see attached delivery instructions or call RBC CM ACATS Department at (866) 506-8587, option 5 with questions.

CUSTOMER(S) SIGNATURE(S) – JOINT ACCOUNTS REQUIRE ALL PARTIES TO SIGN

Client Signature	Date	Medallion Signature Guarantee is required for Non-ACAT or Partial Transfers.
Print Name from Signature Above		
Joint Client Signature	Date	
Print Name from Signature Above		



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SPECIAL NOTICE FOR ALL CUSTODIAL RETIREMENT ACCOUNT TRANSFERS

Required Minimum Distribution Notice: I understand that if this transfer is occurring during or after the calendar year during which I attain the age of 70½, or if I am a beneficiary who is subject to a required minimum distribution ("RMD"), the required minimum amount determined under this Custodial Retirement Account is still required to be distributed. I further understand that the current Trustee/Custodian is not responsible for making this distribution prior to the transfer. I accept full responsibility for satisfying the RMD applicable to this Custodial Retirement Account by withdrawing sufficient amounts prior to the deadline for receiving minimum distributions for the calendar year of the transfer.

If this transfer leaves the transferor account in one year but does not reach my RBC CM Custodial retirement account until the following year, I understand that this will be an "outstanding transfer" as of December 31st. RBC CM, as Custodian, must "deem" that the transfer was received as of the prior December 31st for determining any RMD from the RBC CM Custodial Retirement Account for the year that the transfer was received. I will inform RBC CM of any such outstanding transfer.

To the prior Trustee/Custodian: RBC CM agrees to serve as the successor Custodian for the account of the above-named client, and as Custodian, we agree to accept the transfer of assets to this account. Please be advised that the new account name will read **RBC Capital Markets Corporation as Custodian for the above-named client. Custodian Tax ID #41-1416330.**

Successor Custodian Authorized Signature:

COMPLETE FOR ALL MUTUAL FUND RE-REGISTRATIONS OR BROKER-DEALER CHANGE

NOTE: All Mutual Funds eligible for networking will be networked. Mutual Fund dividend and capital gains options will automatically reinvest if box is not checked.

DIV = Mutual Fund Dividend LTCG = Long Term Capital Gains STCG = Short Term Capital Gains

CHOOSE ONE OPTION ONLY

- 0 = Cash DIV - Cash LTCG - Cash STCG 3 = Cash DIV - Reinvest LTCG - Reinvest STCG 6 = Reinvest DIV - Reinvest LTCG - Cash STCG
- 1 = Reinvest DIV - Reinvest LTCG - Reinvest STCG 4 = Cash DIV - Reinvest LTCG - Cash STCG 7 = Reinvest DIV - Cash LTCG - Reinvest STCG
- 2 = Cash DIV - Cash LTCG - Reinvest STCG 5 = Reinvest DIV - Cash LTCG - Cash STCG

Financial Consultant's Name	Financial Consultant Number
Address	Dealer Number

A copy of your most recent statement is necessary for this form to be processed



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RBC CAPITAL MARKETS CORPORATION DELIVERY INSTRUCTIONS

RECEIVING FIRM INFORMATION

NAME AND ADDRESS: RBC Capital Markets Corporation
510 Marquette Ave. South
Minneapolis, MN 55402-1106

Tax ID: 41-1416330
Phone: (612) 607-8229
Fax: (612) 607-8224

Delivery instructions must include client's name and RBC CM account number

DTC ELIGIBLE SECURITIES	#0235
Physical Checks: (Please print T/A and our account number)	RBC Capital Markets Corporation Treasury Lock Box For the account of: _____ SD 12-1190 P.O. Box 86 Minneapolis, MN 55486-1190
Physical Delivery: (Please print T/A and our account number)	RBC Capital Markets Corporation For the account of: _____ 510 Marquette Avenue South, Attn: M09 – Security Receipts Minneapolis, MN 55402
Through the House Federal Funds	Envelope Y - # 235/NSCC's New York Facility NSCC/New York Window Attn: Carl 55 Water Street 3rd Floor - Plaza Level RBC Capital Markets Corporation
Euroclear Securities:	Bank of New York Account: 218300 Euroclear 16829 For RBC Capital Markets Corporation account: _____
Foreign Securities:	Merrill Lynch Account: 64U-80235 For RBC Capital Markets Corporation account: _____
Commercial Paper, Bankers Acceptance:	Bank of New York Acct: DSP 1 Wall Street, 3rd Floor Window B - Securities Processing New York, NY 10015
GNMA Book Entry(PTC):	BNDRG, Further credit the account of: _____
Government Wireable:	Bk of NYC/DSP, ABA Number: 021000018 Further credit the account of: _____
Wired Funds:	U.S. Bank, ABA 091000022 Account Number 160230097208/RBC Capital Markets Corporation Further credit the account of: _____
Mutual Funds:	<u>IRA Accounts</u> RBC Capital Markets Corporation, Custodian FBO: Account number: _____ 510 Marquette Avenue South, Attn: M08 - Acct Trf Minneapolis, MN 55402 Tax ID: 41-1416330
Broker Dealer Instructions: (If Clearing Agreement Exists with RBC CM)	<u>Cash Accounts</u> RBC Capital Markets Corporation FAO: _____ Account number: _____ 510 Marquette Avenue South, Attn: M08- Acct Trf Minneapolis, MN 55402
Dealer Number: _____	
Broker's Name: _____	
Correspondent Firm's Name and Address:	