

# Direct Rollover Request

Review the following content thoroughly. Upon review, print the documents and obtain the required signatures, as applicable, to finish the request for a direct rollover.

## OWNER INFORMATION

Last Name First MI  
Tax ID Date of Birth  
Account Type Account Number

## FINANCIAL ORGANIZATION INFORMATION

Financial Organization  
Email  
Phone

## Relationship to Current Account Owner

- I am the current account owner
- I am the former spouse of the current account owner
- I am the spouse beneficiary of the original account owner who is deceased, and I am directly rolling over to my own IRA
- I am the spouse, non-spouse, or non-human beneficiary of the original account owner who is deceased, and I am directly rolling over to an inherited IRA

## CURRENT ACCOUNT INFORMATION

Current Account Type  
Employer-Sponsored Retirement Plan  
(if plan contains designated Roth assets, they can only be directly rolled over to a Roth IRA or inherited Roth IRA)

Current Account Owner

Tax ID of Current Account Owner

Current Plan Administrator Name/Address

Current Account Number

Current Plan Name

**ROLLOVER INSTRUCTIONS**

**Rollover Amount**

- Total Amount
- Specific Amount: \$

**Rollover Date**

- Immediately
- On a specific date: (MM/DD/YYYY)
- Upon investment maturity

**Make Payable To**

as Custodian/Trustee of

**Additional Details**

**INVESTMENT OPTIONS**

Investment Name	Minimum Deposit	Dividend Rate	Annual Percentage Yield	Investment Number	Amount

**SIGNATURE**

By signing this **Direct Rollover Request**, I certify that the information I have provided is true and correct. I understand that I am responsible for ensuring I am eligible to authorize this rollover and I assume all responsibilities for any consequences that arise as a result of my actions. I have not received any legal or tax advice from the Custodian/Trustee and any assistance provided by the Custodian/Trustee is not to be construed as such. I elect to irrevocably designate this deposit as a rollover contribution. I will indemnify and hold the Custodian/Trustee harmless from any consequences related to executing my directions. I authorize the plan administrator to directly roll over the plan assets as indicated above and certify the plan is qualified under the appropriate section of the Internal Revenue Code.

Print Account Owner Name

Account Owner Signature

Date




By signing below, the Custodian/Trustee of the receiving IRA agrees to accept this direct rollover as instructed above.

Print Custodian/Trustee Representative Name

Custodian/Trustee Representative Signature

Date