

Rollover Cash

Rollover specialist: 1.877.464.0292

1 OPEN a ShareBuilder IRA and complete this form.

2 CONTACT your plan administrator for any paperwork they require.

3 FAX or mail all paperwork to ShareBuilder to the number or address below.
 Include a copy of your most recent statement from your retirement account.



FAX documents to:

ShareBuilder fax number
 (available 24 hours per day)
866.996.6417 or 206.805.0791



MAIL documents to:

ShareBuilder Securities Corporation
 P.O. Box 4249
 Seattle, WA 98194-0249

"TO" (ShareBuilder account information)

ShareBuilder Account Number: _____ - _____ - _____ (example: 1000-1234567890-01)
 Account Owner: _____ Social Security Number: _____

"FROM" (other retirement account information)

Account type: 401(k) 403(b) 457 Other Employer Plan
 Account Owner: _____ Account Number: _____
 Firm Name: _____ Firm Phone: _____
 Firm Address: _____
Street Address City, State, Zip

Instructions to current trustee/Custodian

Liquidate all assets and send check to ShareBuilder.
Make check payable to ShareBuilder Securities, fbo _____ (Please indicate the above account number on the check.)
Customer name

Authorization and signature

We require a signature of the account owner in order to transfer your assets. Your signature indicates your understanding of and agreement to this transaction.
 I authorize ShareBuilder Securities Corporation to transfer the assets specified in the above form (and on the attached form if applicable), from the brokerage listed in the "FROM" section, to the ShareBuilder account listed in the "TO" section.

X _____
SIGNATURE DATE

Signature guarantee or notary

This area reserved for office use.