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The Entrust Group
Self-Directed Retirement Plan Services

Transfer Form

Entrust Administration, Inc.
555 12th St. Ste. 1250
Oakland, CA 94607
p: (510) 587-0950 | f: (510) 587-0960

5. Description of assets to be transferred: *Please attach additional delivery instructions if needed.*

Asset description	Amount

☐ Delivery instructions are attached. ☐ Current statement is attached.

6. Delivery Instructions: *Please attach additional delivery instructions if needed.*

a. How would you like us to send this transfer request to your current resigning Custodian?

Via ☐ Mail ☐ Express Delivery ($30 fee)

b. How would you like your cash sent from your resigning Custodian to Entrust? (Please note: Fees may apply from your resigning custodian).

Via ☐ Mail/Check ☐ Wire/Electronic To 1 (*Entrust office #*) Mechanics Bank (*Name of Deposit Account*) FBO (my name)

c. If you have selected express services above, how would you like to pay for those services?

Via ☐ Check ☐ Credit Card ☐ Other_____

IMPORTANT: If you need to liquidate investments, please contact the resigning Custodian and inquire about their liquidation/transfer process prior to submitting this completed form. Entrust is not authorized to liquidate assets or investments with the resigning Custodian. Fees may apply from your resigning custodian.

7. Signature and Acknowledgement

Signature and Acknowledgement *(This does not constitute a direct rollover.)*

1. I hereby agree to the terms and conditions set forth in this Account Asset Transfer Authorization and acknowledge having established a self-directed account through execution of the _____ (*Name of plan)* account application.
2. I understand the rules and conditions applicable to an Account Transfer
3. I qualify for the account transfer of assets listed in the Asset Liquidation above and authorize such transactions.
4. I understand that no one at Entrust or any of its licensees has authority to agree to anything different than my foregoing understandings of Entrust policy.

Your Signature _____
(Name of account holder)

Date _____

(Medallion Guarantee Stamp)

8. Acceptance of Receiving Custodian

Pursuant to a limited written delegation, Mechanics Bank, as Custodian ("Custodian"), has authorized Entrust Administration, Inc. to sign this form on the Custodian's behalf to verify the Custodian's acceptance of the transfer, rollover or direct rollover described above and agreement to apply the proceeds upon their receipt, to the Account established by Entrust Administration, Inc., on your behalf. Mechanics Bank ASSUMES NO TRUST OR FIDUCIARY OBLIGATIONS TO YOU AS IT HAS NO INVESTMENT CONTROL OVER YOUR FUNDS AND ACTS ONLY AS A CUSTODIAN OF YOUR FUNDS.

Entrust Administration, Inc. on behalf of Custodian, Mechanics Bank

By _____

Date:_____

Account # _____

FOR OFFICE USE ONLY

Type of Account (check one):

☐ Traditional ☐ Roth ☐ Beneficiary IRA ☐ SEP ☐ SIMPLE ☐ ESA ☐ HSA

Name of Plan_____ Type of Plan _____

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