

VIP Services: (888) 855-9856 • info@trustprovident.com

Remember to include a copy of a recent account statement (within the past 60 days)

Section 1 Account Owner Information

Title:	First Name:	M.I.:	Last Name:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Provident Trust Group Account #:	Provident Trust Group Account Type:	Last 4 of SSN:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Section 2 Current Custodian Account Information

Current Custodian Name:	Phone:		
<input type="text"/>	<input type="text"/>		
Account Type: (E.g. Traditional IRA, Roth IRA, 403(b), etc.)	Account #:		
<input type="text"/>	<input type="text"/>		
Address:	City:	State:	Zip:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 3 Account Transfer Information

Please select Option A **OR** Option B below. Failure to select one **OR** the other may result in a transfer rejection.

Option A: Complete Transfer
(Re-register all assets and/or transfer cash balance.)

- Liquidate all assets and transfer cash balance to IRA or Plan.
- Re-Register all assets and transfer cash balance to IRA or Plan.



For all liquidation requests, contact your current Custodian to initiate the process.

Option B: Partial Transfer
(Transfer a portion of your assets to your Provident Trust Group account.)

Cash Transfer Amount:

Asset Type to Re-Register:	Asset Value:	Qty / # of Shares: (If Applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Asset Type to Re-Register:	Asset Value:	Qty / # of Shares: (If Applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 4 Delivery Options

How will funds be transferred to Provident Trust Group?

Check via Regular Mail

Provident Trust Group, LLC
Attn: Lockbox Department
P.O. Box 4330
Ontario, CA 91761-8330

Make Check Payable to:
Provident Trust Group, LLC
FBO: *Client Name & Acct Type*

Check via Overnight Mail

Citizens Business Bank
Attn: Lockbox Operations Department
9337 Miliken Ave.
Rancho Cucamonga, CA 91730-6002

Make Check Payable to:
Provident Trust Group, LLC
FBO: *Client Name & Acct Type*

Wire Transfer

Citizens Business Bank
16830 Ventura Blvd. Suite 310
Encino, CA 91436

ABA# 122234149
Acct# 046032314

Please reference "Provident Trust Group" in the Bank Account Name and the Account Owner's Name & Account # in the OBI section.

Section 5 Provident Processing & Handling Options

How will this request be submitted to your Current Custodian?

*Please select Option A **OR** Option B below. Failure to select one **OR** the other may result in a transfer rejection.*

Option A: Submit via Fax to:



Verify with your Current Custodian prior to selecting this option.

Option B: Submit via Mail

(Select one of the following Mail Processing Options)

Regular Mail

Priority Mail *($\$15.00$)*

Overnight Mail *($\$35.00$)*



Cannot be sent to P.O. Box

How quickly do you want Provident to process your request?

If you would like expedited processing, please select one of the options below. If no option is selected, "Normal Processing" will apply. Processing fees will be paid by the cash available in your account unless you indicate otherwise.

For "Next-Day" or "Same-Day" Service, all documents must be received, and in good order, by 10am PST.

Normal Processing

Processed within 3 business days.

Next-Day Service *($\$50.00$)*

Processed by 4PM PST next business day.

Same-Day Service *($\$100.00$)*

Processed within the same day.

I elect to cover the fees related to this form with the credit card I have on file. (If you do **NOT** have a credit card on file, please complete a **Credit Card Authorization Form**.)

Section 6 Limited Power of Attorney

I, the undersigned, do hereby grant a limited power of attorney to Provident Trust Group and its agents to request information regarding my account and the status of this rollover or transfer from the custodian listed above. The power of attorney shall commence and be in full force as of the date listed below and shall remain in full force and effect thereafter until the completion of the rollover or transfer of the assets listed in the Funding Options Section.

Section 7

Account Owner Agreement & Authorization

Important: Please read before signing.

I am aware that I am responsible for the payment of Federal Income Tax on the taxable portion of this surrender and that I may be subject to tax penalties under Estimated Tax Payment rules if my payment of estimated tax and withholdings, if any, are not adequate. I am also aware of any surrender/ withdrawal penalties which may apply, and I authorize the transaction described above.

1. I hereby agree to the terms and conditions set forth in this Account Asset Transfer Authorization and acknowledge having established a Provident Trust Group Self-Directed account.
2. I understand the rules and conditions applicable to an Account Transfer. I understand that it is my responsibility to contact my current financial institution to determine whether a medallion guarantee is required. If a medallion guarantee is required, it is my responsibility to take this Form to my bank or credit union for a medallion guarantee. (Failure to obtain a medallion guarantee could result in delays and/or rejection of this request by your current financial institution)
3. I qualify for the account transfer of assets listed in the Payment Instructions section and authorize such transactions.
4. I understand that no one at Provident has authority to agree to anything different than my foregoing understandings of Provident policy.

Medallion Signature Guarantee

 Contact your current custodian (listed in Section 2) to inquire if Medallion is required.

A Medallion Signature Guarantee program is approved by the Securities Transfer Association that enables participating financial institutions to guarantee signatures. The Medallion programs ensure that the individual signing the certificate or stock power is in fact the registered owner as it appears on the stock certificate or stock power. A signature guarantee can be obtained from your bank. If your current custodian does not require a signature guarantee, please sign below and return this form to Provident Trust Group.

I require Provident Trust Group to Medallion Stamp this Form (\$25.00 - Signature and address must match your photo I.D. on file.)

Account Owner Signature:

Account Owner Name: (Please Type or Print)

Date:

Section 8

Provident Trust Group Acceptance

The authorized signature certifies acceptance of the assignment and surrender or transfer of funds as instructed in this request. After deducting any sums as are permitted under the plan, please complete this transaction and send funds with a copy of this form to Provident Trust Group.

Officer Acceptance Signature:

Date:

Congratulations! Now you are ready to submit this request for processing!

We will keep you apprised of the progress of your transfer and look forward to continuing to assist you with any needs or questions that may arise.



Before you submit this form please remember to review all completed information prior to signing. When you are ready, mail, email or fax your completed documents to:

If **original** transfer documents are required by your **current custodian**, **mail** completed forms to:

Provident Trust Group, LLC
8880 W. Sunset Rd., Ste 250
Las Vegas, NV 89148

If your **current custodian** will accept **faxed** transfer documents, please **email** OR **fax** to:

info@trustprovident.com
(702) 253-7565