

# Customer Account Transfer

(Please Use a Separate Form for Each Transfer)

ACAT (Sections 1 & 2)  
Send to H0004-014 Blue Envelope

Mutual Funds (Section 3)  
Send to H0004-014 Orange Envelope

Account You are Transferring TO					
Social Security Number or Tax ID Number	FCC Clearing Number <b>0141</b>	Brokerage Account Number	Sub Firm #	BR Code	FA Code
Full Name or Account Title					

Account You are Transferring FROM	Delivery Organizations: See Delivery Instructions on Page 2.
Account Name	Account Number
Name of Firm or Fund Company Currently Holding Your Account	Clearing Number
Address of Firm	
Check here if this Account is a: <input type="checkbox"/> Qualified Retirement Plan <input type="checkbox"/> IRA <input type="checkbox"/> OTA <input type="checkbox"/> DRT	

## Type of Transfer

**1 Full Brokerage Account Transfer.** (Check one at right)  Transfer all assets or shares in my account as is  Liquidate and transfer cash

**2 Partial or Non-Brokerage Transfer.**  
**A Trust Company, Bank, Credit Union, Savings & Loan, Annuities, Life Insurance, DRIP Plan Shares or Certificates of Deposit Transfer.**

<input type="checkbox"/> Liquidate and Transfer Cash.
<input type="checkbox"/> Transfer all assets or shares in my account as is.
<input type="checkbox"/> Liquidate <b>Certificates of Deposit IMMEDIATELY.</b> (I acknowledge the penalty I may incur from an early withdrawal.)
<input type="checkbox"/> Liquidate <b>Certificates of Deposit AT MATURITY.</b> (Submit this transfer no earlier than 30 days prior to maturity.) Maturity Date _____

**B Partial Brokerage, Trust Company or Annuity Transfer.** (Transfer only the assets or shares listed below) **Choose One for Each Item**

Quantity	Description of Asset and Cusip or Symbol	Liquidate and Transfer cash	Transfer Shares As Is
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

\*For additional assets please attach a separate sheet

**3 Mutual Fund Company Transfer.** (One form per Fund Family. Please send to Mutual Funds, H0004-014 Orange Envelope) **Choose One for Each Item**

Quantity	Full Name of Mutual Fund	Liquidate and Transfer cash	Transfer Shares As Is	Dividend and Capital Gains (Choose One for Each Item)	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Cash for Both	<input type="checkbox"/> Reinvest Both
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Cash for Both	<input type="checkbox"/> Reinvest Both
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Cash for Both	<input type="checkbox"/> Reinvest Both

\*For additional assets please attach a separate sheet

### Age 70½ Reminder - THE FOLLOWING APPLIES ONLY TO A RETIREMENT ACCOUNT TRANSFER.

If you will turn age 70½ this year, or you are already over age 70½, please be reminded that you must withdraw your required minimum distribution amount by the deadline. The deadline for individuals who turn 70½ this year is April 1st of next year and for all others, the deadline is December 31<sup>st</sup> of this year. The IRS penalty for underdistribution of the mandatory amount by the deadline is 50%. In order to calculate the required amount for this year, the value of this IRA on December 31<sup>st</sup> of last year will be needed. In addition, required minimum distributions are not eligible for rollover.

### Auction Rate Securities: Account Transfer Acknowledgement

You understand and agree to the following in connection with the auction rate securities held in your account:

- Your auction rate securities were purchased prior to the transfer of your account to us. As a result, we are not responsible or liable for any prior recommendations or advice with respect to these securities nor are we under any obligation to provide you with any investment recommendation or advice with respect to the disposition or continued holding of these securities in your account following the transfer of your account.
- You also understand and agree that we are not under any obligation to you (i) to provide loans under margin agreements or otherwise secured in whole or part by the auction rate securities in your account, (ii) to purchase or continue to purchase any auction rate securities in periodic rate setting auctions or in secondary market transactions, or (iii) to provide liquidity for such securities. Many auctions for these securities are in failed status meaning that holders of these securities are not able to sell these securities in the periodic rate setting auctions or in secondary market transactions and as a result, liquidity for these securities currently is greatly impaired. We provide no assurance that you will be able to sell or otherwise dispose of these securities following the transfer of your account to us. You understand that we take actions in connection with other customers that we do not offer you in connection with your auction rate securities.

**\*\* A COPY OF YOUR MOST RECENT STATEMENT IS REQUIRED TO PROCESS THIS TRANSFER \*\***

Client Signature <b>X</b>	Date	Joint Account Holder Signature <b>X</b>	Date
<b>For Office Use Only</b>		Signature Guaranteed By	
Sub Firm #	BR Code	FA Code	
FA Signature			
<b>Medallion Signature Guarantee Program</b>			
<b>PLEASE BE ADVISED THAT FIRST CLEARING, LLC ACCEPTS APPOINTMENT AS SUCCESSOR CUSTODIAN.</b>			
Successor Custodian Signature <b>X</b>	Date	Contact Name	Phone Number

**For Delivering Organization's Use Only**

If this account is a qualified retirement account, I have amended the applicable plan so that it names \_\_\_\_\_ (not FCC) as successor custodian. Unless otherwise indicated in the instructions above, please transfer all assets in my account to \_\_\_\_\_.

I understand that to the extent any assets in my account are not readily transferable with or without penalties, such assets may not be transferred within the time frames required by NYSE Rule 412 or similar rule of the FINRA or other designated examining authority. 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. 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 that obligation. If certificates or other instruments in my account are in your physical possession, I instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable the successor custodian 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 affirm that I have destroyed or returned to you credit/debit cards and/or unused checks issued to me in connection with my securities account. I understand that you will contact me with respect to the disposition of any assets in my securities account that are non-transferable.

\*Wachovia Bank, National Association (Wachovia Bank, N.A. until March 20, 2010. Wachovia Bank, a division of Wells Fargo Bank, N.A. effective March 20, 2010. Hereinafter "Wachovia Bank")

<p><b>Receiving Firm Information:</b>                  FIRST CLEARING, LLC                  ONE NORTH JEFFERSON AVENUE                  ST. LOUIS, MO 63103</p>	<p>Tax ID Number:                  23-2384840 - FCC Retail and IRA</p>
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**Delivery Instructions** (All deliveries MUST include the client name and FCC account number.)

<b>Wire Instructions</b>	Wachovia Bank*/Roanoke VA ABA 051400549 Beneficiary: First Clearing, LLC Account # 5050000000631 Further Credit (Client Name & Full Account Number)
<b>All DTC Eligible Securities</b>	DTC #: 0141 Client Name and Client Account Number
<b>Physical Deliveries</b>	FIRST CLEARING, LLC Attn: Physical Transfer - H0006-091 One North Jefferson Avenue St. Louis, MO. 63103 Further Credit to Client Account Number
<b>Book-Entry GNMA Securities – PTC</b> Or <b>Fed Book-Entry – Government Securities</b>	BK of NYC/FCCORP. ABA# 021000018 Further Credit to Client Account Number
<b>Euroclear Eligible Bonds</b> (must notify Security Clearance 2 days prior to settlement)	EUROCLEAR #10665 Further Credit to Client Account Number
<b>Foreign Equities:</b> (must notify Security Clearance in order for them to instruct)	JPMorgan Chase Bank A/C # CHASGBZLST Account of First Clearing, LLC Further Credit to Client Account Number
<b>Forward Checks* to the Address Indicated</b> *Must include Client Name and FCCS Account Number.	<input type="checkbox"/> FIRST CLEARING, LLC Attn: Cash Management – H0006-085 One North Jefferson Avenue St. Louis, MO 63103 Further Credit to Client Account Number  <input type="checkbox"/> _____ _____ _____
<b>ACAT Mutual Fund Registration</b> <b>Instructions - FCC IRA</b>	FIRST CLEARING, LLC FBO: Client Name and Client Account Number One North Jefferson Avenue St. Louis, MO 63103
<b>Mutual Fund Broker-Dealer</b>	First Clearing, LLC