

Receiving Firm – Apex Clearing Corporation ("Apex Clearing") – Clearing #0158

1. Information about your account:										
Title of Your A	Accour	nt:								
Apex Clearing Account Number:					SSN / Tax ID:					
** Please attach a copy of your most recent statement for the account you are transferring to Apex.										
2. Information about the account you are transferring:										
Title of Your Account:										
Account Numl	ber:		N	lame of	of Firm:					
Address of Fir	rm:									
City, State, ZIP					Broker Clearing No:					
** If your ApexClearing account is not the same type of account as the one you are transferring, you must										
	complete the Letter of Authorization (Section 7) on the 2 nd page of this form.									
3. Type of Transfer:										
_	☐ Brokerage Firm Transfer (Transfer all assets in kind)					□ Non-ACAT Transfer (Transfer all assets in kind)				
☐ Liquidate all assets and Transfer as cash					Liquidate annuity and transfer as cash					
☐ Partial Transfer (Skip to Section 4) ☐ Liquidate Certificates of Dep (I am aware of and acknowledge the pe										
☐ Mutual Fur	nd Cor	mpany Transfer (S	kip to Section 5)	Transfer proceeds of Certificates of Deposit AT						
MATURITY (Submit transfer request 30 days prior to maturity).										
4. Partial Transfer: (Please specify the assets you wis Quantity Assets Description / Symbol					h to transfer, Attach additional pages if needed) Transfer (Select One)					
Quantity	Assets Description / Cymbol				☐ Transfer In Kind					
							☐ Transfer In Kind			
	-					☐ Liquidate ☐ Transfer In Kind				
							☐ Transfer In Kind			
						☐ Liquidate ☐ Transfer In Ki	☐ Transfer In Kind			
						Liquidate				
5. Mutual	5. Mutual Fund Company Transfer: (Use a separate form for each mutual fund company)									
Name of Fund	d Com	pany:								
Name of Fund/Symbol/Cusip		Fund Account #		Transfer (Select One)	Future Dividend (Select One)	Future Capital Gains (Select One)				
		☐ Transfer In Kind ☐ Liquidate			☐ ALL ☐ # of Shares	☐ Reinvest ☐ Pay in Cash	☐ Reinvest ☐ Pay in Cash			
		☐ Transfer In Kind ☐ Liquidate			☐ ALL ☐ # of Shares	☐ Reinvest ☐ Pay in Cash	☐ Reinvest ☐ Pay in Cash			
		☐ Transfer In Kind ☐ Liquidate			☐ ALL ☐ # of Shares	☐ Reinvest ☐ Pay in Cash	☐ Reinvest ☐ Pay in Cash			

6. Signature(s): (Please read and sign below)

If this account is a qualified retirement account, I have amended the applicable plan so that it names Apex Clearing Corporation ("Apex Clearing") as successor custodian. Unless otherwise indicated in the instructions above, please transfer all assets in my account to Apex Clearing. 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 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 to Apex Clearing. 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 into 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.

rimary Signature:	Date	э:			
econdary Signature:	Date	e:			
		Medalli	on Signature Guarantee Program		
		Medalli	on Signature Guarantee Program		
etter of Acceptance – To the prior cus accepts an app	stodian/Trustee: Please be ad pointment as successor custod		Corporation ("Apex Clearing ") here		
Successor Custodian/Trustee Author	Date:				
ax ID Number Successor Custodian	n:		Date of Trust:		
7. Letter of Authorization:	(Please complete if the tur	ne of account in Section	1 is different than Section 2)		
To: Apex Clearing Corporation:					
Transfer From:	_i nereby authorize the follo	JWING HANSIEL OF ASSER	o.		
Delivering Firm:					
Account Number:					
Account Number: Account Title:					
Transfer To:					
Apex Clearing Account Number:					
Account Title:					
Investment Representative's Name	9	Office	e #Rep #		
I understand this transfer constitute		f the assets and that th	e new registered account		
holders will have exclusive rights to	the assets.				
Sincerely,					
	v				
XPrimary Applicant Signature	^	condary Application Sig	natura		
Primary Applicant Signature	Sec	condary Application Sig	nature		
***Completion o	of this form does not guaran	itee acceptance by deliv	ering Firm.		
•			-		
	r Broker Use Only – Tra				
REGULAR MAILING INSTRUCTIONS:	GNMAINSTRUCTIONS:		NG WIRE INSTRUCTIONS:		
Apex Clearing Corporation c/o Broadridge Attn: Imaging & Workflow Solutions	ABA: 021000018/QUICK	BMO Har			
P.O. Box 1348	TAXID#:		111 W Monroe St Chicago, IL 60603		
Brentwood, NY 11717-4627	13-2967453	ABA:071	ABA:071000288		
OVERNIGHT MAILING INSTRUCTIONS:	NSCCI NSTRUCTI ONS:		SWIFT: HATRUS44		
Apex Clearing Corporation c/o Broadridge	NSCC# 0158 Apex Clearing		Apex Clearing Acct 3713286		
Attn: Imaging & Workflow Solutions	FNMA/ FREDDIES/ USTREAS		stomer Name and BPS A/C#		
1155 Long Island Ave Edgewood, NY 11717	INSTRUCTIONS:		MUTUAL FUND RE-REGISTRATION:		
	ABA 021000018		earing Corp.		
DTCINSTRUCTIONS:	Bank of New York/QUICK		c/o Broadridge Outsourcing Solutions		
# 0158 Apex Clearing FAO: Customer Acct #	AGENTID/INSTITUTIONAL:	FBO:			
(Apex accepts PTD's and PTR's)	89331		count Transfer Dept. Il Square, 3 rd Floor		
PHYSI CALI NSTRUCTI ONS:	CREST SECURI TI ES:		il Square, 3° Floor ity, NJ 07306		
Depository Trust Company	Apex Clearing Corporation Crest LD 82XH.I	•	S: (regular mail or overnight delivery)		
	CIESLID OZADJ	CHECKS	STREMINAL MAIL OF OVERDIANT GENVERY)		

ALTERNATI VE I NVESTMENTS

Apex Clearing Corp. c/o Broadridge

Attn: Alternative Investments Dept.

RE-REGI STRATI ON:

1981 Marcus Avenue

Lake Success, NY 11042

CHECKS: (regular mail or overnight delivery)

c/o Broadridge Outsourcing Solutions

Attn: Cash Management Dept.

2 Journal Square, 3rd Floor

Jersey City, NJ 07306

Apex Clearing Corp.

69050AP-LP-TRF 04/04/2014

Reference: Apex Clearing

Central Delivery Window

Jersey City, NJ 07310

Euroclear: #10403

570 Washington Blvd, 1st Fl

FOREI GN SECURI TI ES I NSTRUCTI ONS: