

Please complete and submit this form with the Transfer Authorization form if you are transferring assets in-kind.

Mail this form with TRANSFER AUTHORIZATION to: 221 South Phillips Avenue, Suite 206, Sioux Falls, SD, 57104  
Fax: 605-415-4296 | E-mail: info@IRAFinancialTrust.com | For inquiries, call: 800-472-1043 or visit IRAFINANCIALTRUST.COM

**A. IRA OWNER IDENTIFICATION**

FULL NAME

PHONE NUMBER

**B. CURRENT CUSTODIAN INFORMATION**

Please provide the contact details for the custodian currently holding the asset(s) you wish to transfer. Complete one section per asset as listed on the Transfer Authorization form - Section C. Use additional pages if necessary.

<b>1</b>	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email

<b>2</b>	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email

<b>3</b>	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email

<b>4</b>	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email

<b>5</b>	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email