



820 Jorie Blvd. Suite 420
Oak Brook, IL 60523
630.368.5600 Telephone

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IRA AUTHORIZATION DIRECT ROLLOVER TO QUALIFIED PLAN

(This form is used to authorize/request a "direct rollover" from an IRA to a qualified plan.)

A DIRECT ROLLOVER INSTRUCTIONS

Present Custodian/Trustee Information:

Type of IRA:

- Traditional Roth SEP

Trustee/Custodian Name: _____

Trustee/Custodian Address: _____

City: _____ State: _____ Zip: _____

Trustee/Custodian Phone No.: _____

Participant Information:

Name: _____ Millennium Account No.: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone No.: _____ Social Security Number: _____

- Please rollover account indicated above to Successor Plan Custodian indicated below:

Successor Plan Custodian Information:

All checks and/or securities should be made payable or registered to:

**Millennium Trust Company, LLC
Custodian FBO**

Type of Plan:

- Profit Sharing/Pension Plan
 Individual 401(k) Plan

Employer/Trustee Name: _____

Address: 820 Jorie Blvd., Suite 420

City, State, Zip: Oak Brook, IL 60523

Tax Identification No.: 36-4400066

B DIRECT ROLLOVER AUTHORIZATION

The participant named above has requested that his/her retirement benefits be directly rolled over from their IRA to the Qualified Plan indicated above. As the Successor Custodian, this is to authorize the present Trustee/Custodian to send the funds payable to the Successor Custodian for the benefit of the participant as indicated below (Please select one):

- Liquidate all assets and send cash proceeds to Successor Custodian.
 - Liquidate \$ _____ and send cash proceeds (partial) to Successor Custodian.
 - Liquidate all assets except those listed below, which are to be directly rolled over "in kind" to Successor Custodian.
- Check here if you would like your funds wired. (Fee may apply — please check with your current Custodian.)

Quantity (All shares, or specify #)

Name of Fund, Security, or Asset

_____	_____
_____	_____
_____	_____



C **RECIPIENT'S ACKNOWLEDGEMENT AND SIGNATURE**

ACKNOWLEDGEMENT AND SIGNATURE BY CLIENT:

By signing this form, I/we certify that the Successor Plan is a defined contribution plan that accepts eligible rollover distributions. Furthermore, the present custodian can rely on the information herein without further investigation and will be held harmless for any adverse consequences that may result.

Participant: _____

Date:

Millennium Trust Company, LLC

By: _____

Date:

Date Mailed:

[Medallion Signature Guarantee Stamp Here]

A Medallion Signature Guarantee may be obtained from an authorized officer at a brokerage firm, bank or other financial institution. Certification by a notary public is not a substitute for a signature guarantee.

This form will be sent to your current Custodian by regular U.S. Mail unless overnight delivery is requested.

- Yes, I authorize Millennium to send by overnight delivery (A \$25 fee will be charged to your Millennium Account).

PLEASE DO NOT FAX THIS FORM.