

Forward To: First Trust Retirement, c/o DST Systems, Inc.

PLEASE PRINT OR TYPE

IMPORTANT INFORMATION:

Please check with your current custodian for their Transfer/Rollover Requirements.

Regular Mail

PO Box 219731
Kansas City, MO 64121-9731
855.387.3847

Overnight Delivery

Mail Stop: Carter Validus
Mission Critical REITs
430 West 7th Street
Kansas City, MO 64105-1407

1. NAME & ADDRESS

IRA Owner Name	Social Security Number	Account Number
Address	City / State / Zip	Phone Number

2. CURRENT CUSTODIAN NAME & ADDRESS

Funds are staying with First Trust Retirement as Custodian, changing investments only. (Please provide investment name & account number.)

Current Custodian Name	Current Custodian Phone Number	Current Product Sponsor Name/Fund Number
Current Custodian Address	City / State / Zip	Account # to be transferred

3. TYPE OF TRANSFER / ROLLOVER

- Transfer from Traditional IRA
- Transfer from SEP IRA
- Transfer from Roth IRA
- Rollover from a Qualified Plan, SIMPLE IRA, 401(k), 403(b) or Profit Sharing Plan*
*Your employer may require additional forms to process your request.
- Custodian specific form included. FTR will include with the Letter of Acceptance sent to resigning custodian. (This alerts FTR to include required additional documentation.)

Are any of these funds/assets from an Inherited Account?

Yes No

4. TRANSFER INSTRUCTIONS TO CURRENT CUSTODIAN (check all that apply)

- Transfer Account listed in Step 2 and liquidate additional cash proceeds (If applicable). Select this option for moving assets out of the current investment, either to First Trust Retirement (FTR) as a new custodian or staying with FTR.
(Please issue a check payable to First Trust Retirement)
Amount to liquidate: All Partial liquidation of \$ _____
- Transfer in Kind Account listed in Step 2 and liquidate additional cash proceeds (If applicable). Select this option for a Transfer in Kind staying with the current investment that is changing custodians only.
(Please issue a check payable to First Trust Retirement)
Amount to transfer: All Partial amount of \$ _____
- Transfer funds from existing Undirected Cash Account.
Amount to transfer: All Partial amount of \$ _____

5. SIGNATURE REQUIRED

IRA Owner Signature	Date	Medallion Signature Guarantee if required by Current Custodian Listed in Step 2
---------------------	------	---

FOR INTERNAL USE ONLY

Acceptance of Rollover/Transfer/Conversion by First Trust Retirement:

By: James F. Dobbie
First Trust Retirement Authorized Signature

_____ Date

