

IRA DISTRIBUTION REQUEST FORM

Acco	ount Number:							
Acco	ount Type:	IRA/SEP/Rollover	Roth IRA	Coverdell ESA SIMPI	LE IRA			
Name	;		Date of Birth		Social Security	Number		
A J J				I cir.		Ct-t-	710 C-1-	
Addre	ess			City		State	ZIP Code	
E-Ma	il Address (if availab	ile)	Daytime Phone		Evening Phone			
REA	ASON FOR DIS	STRIBUTION – All reportable	distributions will ge	enerate IRA Form 1099-R				
	Premature (No	Exception): IRA holder is und	er age 59 ½. A 10%	penalty may result. Roth rules ve	ary; consult wi	th your tax adv	visor.	
amo							e the distribution	
	Roth Conversi	on: Convert traditional IRA asso	ets to a Roth IRA.	SIMPLE IRA accounts are eligible	e only after 2 y	ears.		
	SIMPLE IRA	Distribution: Provide the date t	hat the SIMPLE IR.	A was originally funded		_		
stati								
deliv			e decree with clearly	y visible seal along with former sp	oouse's social s	security numbe	r, date of birth, and	
	Normal: IRA h	older is 59 ½ or older.						
	Direct Rollove	r: Distribution from a traditiona	l IRA to a Qualified	Retirement Plan. (requires accept	tance letter)			
	REASON FOR DISTRIBUTION — All reportable of Premature (No Exception): IRA holder is under Premature (Exception): Substantially equal per amount under IRS rule 72(t). In the absence of this of Roth Conversion: Convert traditional IRA assessibility: The IRA holder must be totally and stating that the disability is total and permanent. In the Death: Attach a copy of death certificate. Provice opies of Letters Testamentary/Administration dated Divorce: Enclose a copy of the certified divorce delivering instructions. Normal: IRA holder is 59 ½ or older. Direct Rollover: Distribution from a traditional Name of Plan Address of Plan Removal of Excess Contribution: I would like tax year Please note that earnings/loss may be applied to the excess and that Recharacterization: I authorize Legent Clearin Roth Conversion of \$ mr. Contribution of \$			Account Number				
	Address of	f Plan						
tay v		cess Contribution: I would like	e to remove excess of	contribution of \$	_ made on date		for	
Pleas	e note that earnings/	loss may be applied to the excess and tha	t earnings are subject to t	taxation and possibly the 10% penalty. Con	ısult your tax advis	or for more inform	ation.	
	Roth Conver	rsion of \$	nade on date					
Pleas	Contribution e note that earnings/	of \$ m loss may be applied to the recharacteriza	ade on date	lvisor for more information.				
AWI	OUNT OF DIS							
	Full	Partial \$	R	MD \$	_			
Asse	ets							
		Name of Asset		Account Number	Instruction	ns		
					Liquidate Re-	register		

LC20 - 08/06

FREQUENCY OF DISTRIBUTION
One time only
Systematic Monthly Quarterly Semi-Annually Annually
Start Date End Date
METHOD OF DISTRIBUTION
If nothing is selected, Legent Clearing will default to sending a check to the address of record.
Check sent to address of record
Check sent to an alternate address
Overnight (fees may apply)
Journal to account #
Wire (fees may apply) Bank Name Bank City/State
ABA#
Account # Type of Account: Checking Savings
ACH transfer (If you are establishing a new ACH transfer or changing an existing one, please include MoneyLink Transfer Form #LC16)
Federal income taxes must be withheld from distributions unless the recipient elects not to have withholding apply. You may elect out of this withholding by checking the appropriate box below. If no election is made, we must withhold taxes at the required flat 10% rate. If you live in a state that requires state withholding, that amount may be withheld also.
Choose one:
Option 1: I elect to have no taxes withheld from my retirement account distribution. Option 2: I want taxes withheld from my retirement account distribution at a rate of
If you have indicated above that you are taking partial distributions, your withholding election shall remain in effect until it is revoked by you.
State Withholding If you do not make an election, we will automatically apply withholding at the maximum rate based on your state of residence. (Please see page 3 for state withholding information. You cannot elect withholding for a state that is not on page 3.)
I declare my permanent state of residence is If a permanent state of residence is not noted, we will default to the state on record.
I elect not to have state income tax withheld. I elect to withhold state tax from my distribution at a rate of%.
Your Signature and Date (If Coverdell Education Savings Account, responsible individual must sign if designated beneficiary is a minor.) *Please read and sign the following section*
I certify that I am the proper party to receive payment(s) from this IRA and that all information provided by me is true and accurate. I further certify that no tax advice has been given to me by the Trustee or assigns. All decisions regarding this withdrawal are my own. I am fully responsible for the accuracy of any RMD calculations or timely distributions on any required funds. I expressly assume the responsibility for any adverse consequences which may arise from this withdrawal and I agree that the Trustee or assigns shall in no way be held responsible.

(IRA Holder or Beneficiary)

(Date)

Please contact your tax advisor before making any election regarding state withholding. State law is subject to change and neither Legent Clearing nor Delaware Charter is responsible for changes in state law that may affect the accuracy of this communication. Please consult your broker for updated to this list.

State	If you elect withholding, Legent will withhold	If you elect no withholding, Legent will	If you leave the state withholding blank, Legent will
AZ – Arizona	10, 19, 23, 25, 31 or 37% of Federal taxes taken	Not withhold	Not withold
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CA – California	10% of Federal taxes taken	Not withhold	Withhold 10% of Federal taxes taken
CT – Connecticut	Whole dollar amounts that are at least \$10	Not withhold	Not withhold
GA – Georgia	6% of total distribution	Not withhold	Withhold 6% of the total distribution
IA – Iowa	5% of total distribution	Not withhold	Withhold 5% of the total distribution
			N
IL – Illinois	The percentage indicated by IRA holder	Not withhold	Not withhold
KS – Kansas	5% of total distribution	Not withhold	Withhold 5% of total distribution
LA – Louisiana	The percentage indicated by IRA holder	Not withhold	Not withhold
MA – Massachusetts	5.3% of total distribution	Not withhold	Withhold 5.3% of total distribution
MD – Maryland	4.75% of total distribution	Withhold 4.75% if Federal withholding > 0	Withhold 4.75% of total distribution
ME – Maine	5% of total distribution	Not withhold	Withhold 5% of total distribution
MI – Michigan	3.9% of total distribution	Not withhold	Withhold 3.9% of total distribution
NC – North Carolina	4% of total distribution	Not withhold	Withhold 4% of total distribution
NE – Nebraska	The percentage indicated by IRA holder	Not withhold	Not withhold
NJ – New Jersey	The percentage indicated by IRA holder	Not withhold	Not withhold
NY – New York	The percentage indicated by IRA holder	Not withhold	Not withhold
OK – Oklahoma	8.65% of total distribution	Not withhold	Withhold 8.65% of total distribution
OR – Oregon	8% of total distribution	Not withhold	Withhold 8% of total distribution
VA – Virginia	5.75% of total distribution	Not withhold	Withhold 5.75% of total distribution
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VT – Vermont	2.7% of total distribution	Not withhold	Withhold 2.7% of total distribution
WI – Wisconsin	The percentage indicated by IRA holder	Not withhold	Not withhold