



## SMA Traditional IRA Request for Transfer of Assets

3500 Blue Lake Drive Suite 360  
Birmingham, AL 35243  
Email: smaira@sma.org

### Account information for the custodian/trustee you are transferring from

Custodian/Trustee Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### SMA IRA Participant Account Information

Account holder Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_

### Your request to SMA Services:

You are presently serving as custodian/trustee of my Retirement plan under Section 408(a) of the Internal Revenue Code. I hereby authorize you to liquidate all the assets in the above referenced account and forward the proceeds to the custodian of my SMA Traditional IRA Account as soon as possible.

Signature of SMA IRA Account Holder: \_\_\_\_\_ Date: \_\_\_\_\_

Please make your check payable to:

**SMA Retirement Program**  
**3500 Blue Lake Drive Suite 360**  
**Birmingham, Alabama 35243**

### For SMA Services Use Only

We hereby consent to act as custodian and are willing to receive/rollover of assets from the above referenced account.

Signature: Russell E. Glick Date: \_\_\_\_\_