

FORM IROLL-C: ROLLOVER CERTIFICATION

I.E. Code

Account Number

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1. PERSONAL INFORMATION

Full Name (First, Middle, Last)		I am the: <input type="checkbox"/> IRA Account Holder/Qualified Plan Participant <input type="checkbox"/> Surviving Spouse Beneficiary <input type="checkbox"/> Alternate Payee designated in qualified court order
Social Security #	Date of Birth	

2. SOURCE OF ELIGIBLE ROLLOVER FUNDS

<input type="checkbox"/> IRA (please indicate type of IRA below) <input type="checkbox"/> Traditional/SEP <input type="checkbox"/> Roth <input type="checkbox"/> SIMPLE IRA	<input type="checkbox"/> QRP- Qualified Retirement Plan (please indicate type of QRP below) <input type="checkbox"/> Profit Sharing/401k Plan <input type="checkbox"/> Defined Benefit Plan <input type="checkbox"/> Money Purchase Pension Plan <input type="checkbox"/> 457 Deferred Comp Plan <input type="checkbox"/> 403b Tax Sheltered Annuity <input type="checkbox"/> ESOP <input type="checkbox"/> Other: _____
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3. ELIGIBLE ROLLOVER REQUIREMENTS

- Rollover contributions must be made within 60 days of my receipt of the funds
- Rollover contributions cannot include any amounts which represent a required minimum distribution
- Only the IRA account holder or QRP plan participant, surviving spouse beneficiary, or alternate payee identified in a Qualified Domestic Distribution Order (QDRO) is eligible to rollover funds
- IRA to IRA rollover contributions must consist of the same assets originally distributed
- IRA to IRA rollover contributions cannot consist of the assets that have been rolled over in the preceding 12 months, nor can they come from an IRA that has distributed assets that were rolled over in the preceding 12 months
- Rollovers from QRPs may consist of the proceeds from the sale of distributed property
- QRP Distributions taken on account of hardship cannot be rolled over
- Rollover contributions to a SIMPLE IRA can only consist of funds distributed from a SIMPLE IRA
- Assets can only be rolled over from a SIMPLE IRA to a traditional IRA after the two years of participation in the SIMPLE plan

4. DESCRIPTION OF ROLLOVER

THE ELIGIBLE ROLLOVER INDICATED ABOVE CONSISTS OF:

CASH IN THE AMOUNT OF \$ _____ AND/OR

THE FOLLOWING SECURITIES: _____

5. SIGNATURES (Subject to acceptance by the Custodian)

I have read and understand the eligible rollover requirements and I have met the requirements for making a rollover. Due to the important tax consequences of rolling over funds or property to an IRA or Qualified Plan, I have been advised to see a tax professional. All information provided by me is true and correct and may be relied on by the Custodian. I assume full responsibility for this rollover transaction and will not hold my broker dealer or its clearing firm, Wedbush Morgan Securities, liable for any adverse consequences that may result.

I hereby irrevocably designate the contribution described above as a rollover contribution.

X _____
 Participant's Signature (or signature of Parent or Legal Guardian) _____ Date _____

X _____
 Plan Administrator Acceptance (must complete if funds are to be deposited into a QRP) _____ Date _____

For Office Use Only:

X _____
 Signature Guaranteed by Authorized Signatory _____ Date _____

FOR CUSTODIAN USE ONLY

Acceptance _____
 (Print Name) _____ (Signature) _____ (Date) _____