



P.O. Box 669802, Dallas, TX 75266-0955

ROTH IRA TRANSFER REQUEST

Please review all information below and complete as applicable. If you have any questions regarding the information on this form, please contact our IRA Specialists toll-free at 1-866-226-5638.

Present IRA Trustee/Custodian (Location of funds)

Name
Address
City/State/Zip

Acceptance

By the authorized signature below, the successor (receiving) IRA Trustee/Custodian agrees to accept the transferred assets and to deposit them into an IRS-approved IRA.



IRA Owner Information

Name	Social Security Number	Date of Birth
Address	Phone Number	
City/State/Zip	Synchrony Account Number	

Transfer Authorization to Present IRA Trustee/Custodian

Please transfer the following Roth IRA assets: (Cash Proceeds Only)

The entire balance of Account # _____

Only the balance in these account(s): # _____ # _____ # _____

Only this specific dollar amount: \$ _____ From Account #: _____

Other (specify) _____

Please transfer the assets Immediately* At maturity date of _____ Other: _____

* I understand that penalties for early withdrawal may apply.

Make Check Payable to: **Synchrony Bank** _____, Custodian
Name of Receiving IRA Trustee/Custodian

For the IRA of: _____
Name of IRA Owner

Transfer Method:

Mail check to: **Synchrony Bank – Retirement Services**
Name of Receiving IRA Trustee/Custodian

PO Box 669802
Address

Dallas, TX 75266-0955
City/State/Zip

Wire funds to: **021213591**
Routing Number of Receiving IRA Trustee/Custodian

Transferee Account Number: _____
Please include this account number with remittance.

NOTE: Please return one copy of this form to the receiving IRA Trustee/Custodian.

Signatures

I certify that, to the best of my knowledge, the information provided on this form is true and correct and may be relied upon by the Trustee/Custodian. The Trustee/Custodian has not provided me with any legal or tax advice, and I assume full responsibility for this transaction. I will not hold the Trustee/Custodian liable for any adverse consequences that may result from this transaction.

X _____ **X** _____
Signature of Owner Date Signature of Trustee/Custodian Date

Transfers may require a Signature Guarantee – Please contact the current Custodian to see if one is needed.