

# Auxier Focus Fund

# IRA Asset Transfer Form

## I. INSTRUCTIONS

This form is used to transfer an existing IRA to your Auxier Focus Fund IRA.

- If a new account is being opened, complete this IRA Asset Transfer Form and an Individual Retirement Account Application.
- Attach a statement from your existing IRA to this form.
- If you are transferring a passbook/certificate type account or an insurance type IRA, you must submit the passbook, certificate or insurance policy with this form.
- **The current custodian or trustee holding your IRA may require a "Signature Guarantee" or have other requirements. Please determine the requirements of your current custodian or trustee to avoid delays in processing your transfer.**
- Mail this completed form (along with your Individual Retirement Account Application, if opening a new account) to:

Auxier Focus Fund  
P.O. Box 588  
Portland, ME 04112

or Overnight Delivery to:

Auxier Focus Fund  
Attn: Transfer Agent  
Atlantic Fund Administration, LLC  
Three Canal Plaza, Ground Floor  
Portland, ME 04101

Contact us at: 1-877-328-9437

## II. YOUR AUXIER FOCUS FUND IRA

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Your Account Number (unless new account)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Your Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Birth Date

\_\_\_\_\_  
Telephone (Day)

\_\_\_\_\_  
Telephone (Evening)

## III. ACCOUNT BEING TRANSFERRED

\_\_\_\_\_  
Name of the Institution Currently Holding Your IRA (Shareholder Servicing Agent/Transfer Agent if mutual fund)

\_\_\_\_\_  
Your Custodian's Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Account Executive (if any)

\_\_\_\_\_  
Customer Service Telephone Number

## IV. TRANSFER INSTRUCTIONS

### Mutual Fund Company Transfer

Name of Fund \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_

Name of Fund \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_

Name of Fund \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_

Name of Fund \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_

**Securities Transfer**

Security Name \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_  
Security Name \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_  
Security Name \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_  
Security Name \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_

**Certificate of Deposit Transfer**

- Transfer the proceeds of my CD, which matures on \_\_\_\_\_, upon maturity  
Date (MM-DD-YYYY)
- Transfer the proceeds of my CD immediately

Note: If you are transferring a CD, and you wish to transfer your CD at maturity, please check the "Upon Maturity" box above and send this form at least two weeks prior to maturity. There may be a premature withdrawal penalty if you choose to liquidate a CD prior to maturity.

**V. SIGNATURE AND AUTHORIZATION**

I hereby agree to the terms and conditions set forth in this IRA Asset Transfer Form, and acknowledge establishing an IRA in the Auxier Focus Fund through my execution of a Auxier Focus Fund IRA Application.

**Please Note: The custodian or trustee holding your current IRA may require a "Signature Guarantee" prior to releasing your assets. To avoid processing delays, please check with your custodian to determine if a "Signature Guarantee" is required.**

▷ \_\_\_\_\_ Date (MM-DD-YYYY)  
Your Signature

▷ \_\_\_\_\_  
*Signature Guarantee (if required by your current custodian)*

**DO NOT COMPLETE THE SECTION BELOW**

**INSTRUCTIONS TO RESIGNING TRUSTEE/CUSTODIAN**

Type of IRA:  TRADITIONAL  SEP-IRA  ROTH

Please forward a check made payable to the **Auxier Focus Fund, FBO** \_\_\_\_\_

Please include the following reference number on the check \_\_\_\_\_

Please forward the check or draft and any accompanying documents to:

**Auxier Focus Fund  
P.O. Box 588  
Portland, ME 04112**

**or Overnight Delivery to:**

**Auxier Focus Fund  
Attn: Transfer Agent  
Atlantic Fund Administration, LLC  
Three Canal Plaza, Ground Floor  
Portland, ME 04101**

**Contact us at: 1-877-328-9437**

**INSTRUCTIONS FROM ACCEPTING CUSTODIAN**

The Custodian hereby accepts its appointment as IRA Custodian, agrees to accept the transfer described above and, upon receipt, will apply the proceeds to the Auxier Focus Fund IRA established on behalf of the individual named herein.

\_\_\_\_\_  
Authorized Signature (On behalf of the Auxier Focus Fund)

\_\_\_\_\_  
Date (MM-DD-YYYY)