

**CUSTOMER RETIREMENT PLAN SECURITIES ACCOUNT TRANSFER FORM**

<b>Carrying Firm Clearing #</b>	<b>Carrying Firm Account #</b>	<b>Account Title</b>	<b>Account Type: IRA, Qualified or Retirement</b>

<u>Receiving Firm Account #</u> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<u>Receiving Firm Clearing #</u> <b>JEF 0019</b>	<u>Receiving Firm Name and Address:</u> <b>Jefferies &amp; Company, Inc.</b> Harborside Financial Center, 34 Exchange Place, Plaza III, Suite 705 Jersey City, NJ 07311	<u>Receiving Firm Contact Info:</u> <b>ACAT Department</b> 201-761-7760
	<u>OCC Receiving Clearing #</u> <b>0019</b>		

**Prior Custodian/Trustee Firm Name:**  **Prior Custodian Tax ID #:**

You are the Custodian / Trustee for my retirement plan with the below referenced Carrying Firm. As my Carrying Firm, please be advised that I have amended my retirement plan and have adopted a new retirement plan with the below indicated as successor.

**Carrying Firm Name:**

**Please transfer my entire securities account to such custodian / trustee.** I understand that to the extent any assets in my securities account are not readily transferable, with or without penalties; such assets may not be transferred within the time frames required by the NASD Rule 11870 and NYSE Rule 412 or other designated examining authority. All transfers are subject to the By Laws and Rules of the NSCC. Unless otherwise indicated in the instruction below, I authorize you to liquidate any non-transferable proprietary money market fund assets that are part of my securities account and transfer the resulting credit balance to the Receiving Firm. I understand that you will contact me with respect to the disposition of any other assets in my securities account that are non-transferable. If certificates or other instruments in my securities account are in your physical possession, I instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable such Receiving Firm to transfer them in its name for the purpose of sale, when and as directed by me. I further instruct you to cancel all open orders for my securities account on your books.

Instruction: Disposition of Money Market Fund Assets Other Than Liquidation and Transfer \_\_\_\_\_

Customer's Signature	Taxpayer ID or SSN	Date
Customer's Signature (if Joint)	Taxpayer ID or SSN	Date
Customer's Signature (if Joint)	Taxpayer ID or SSN	Date

**Please attach a copy of the customer's most recent account activity statement.**

**SUCCESSOR CUSTODIAN / TRUSTEE NAME, ADDRESS AND TAX ID #:**  
 Delaware Charter Guarantee and Trust Company, P.O. Box 8963, Wilmington Delaware 19899 - Tax ID # 51-0099493  
 Please be advised that Delaware Charter Guarantee and Trust Company will accept the above referenced account as successor custodian/trustee. Please send all checks and non-DTC eligible items to Jefferies & Company, Inc.

<b>Successor Custodian / Trustee Authorized Signature</b>	<b>Date</b>	<b>Successor Custodian / Trustee Tax ID #</b>	<b>Date</b>
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**FOR BROKER USE ONLY**

**MUTUAL FUND REGISTRATION INSTRUCTIONS:**  
 Name: \_\_\_\_\_ Address: \_\_\_\_\_

**DIVIDEND and CAPITAL GAINS OPTION:**  Reinvest  Dividend/Capital Gains Reinvest  All Cash  Issue Certificate  Deposit to New Plan

**DEPOSIT TO EXISTING PLAN:** \_\_\_\_\_

**BROKER INSTRUCTIONS (If Broker Agreement Exists):** \_\_\_\_\_

<b>Registered Representative Name and Rep#</b>	<b>Date</b>
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