



IN-KIND TRANSFER SUPPLEMENTAL INFORMATION

Please complete and submit this form with the Transfer Authorization form if you are transferring assets in-kind.

Mail this form with TRANSFER AUTHORIZATION to: 1688 Meridian Avenue, Suite 504, Miami Beach, FL 33139
Fax: 605-415-4296 | E-mail: info@IRAFinancialTrust.com | For inquiries, call: 800-472-1043 or visit IRAFINANCIALTRUST.COM

A. IRA OWNER IDENTIFICATION

FULL NAME

PHONE NUMBER

B. CURRENT CUSTODIAN INFORMATION

Please provide the contact details for the custodian currently holding the asset(s) you wish to transfer. Complete one section per asset as listed on the Transfer Authorization form - Section C. Use additional pages if necessary.

1	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email

2	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email

3	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email

4	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email

5	Name of Current Custodian	Street Address
	Telephone Number	City, State, Zip Code
	Fax Number (Optional)	Email