

Direct Registration Service (DRS) – Transfer Form

Instructions: Please return this signed form and provide a DRS Advice Notice or Statement dated within 90 days to request delivery from a transfer agent using the Direct Registration System (DRS). Email the completed form and statement copy to serviceservice@acsunshine.com Attn: Client Services.

*Additional documentation may be required for some securities before a request is submitted. You will be notified if this information is required.

Clearing Firm Accoun	t Informatio	n				
Account Number Account Registration Title						
SSN/TAX ID			SSN/TAX ID (secondary, if applicable)			
Account Type (select o	one)					
Individual Joint Trust (Other Lego	al Entity:	
Transfer Agent Accou	nt Informatio	on				
Company Name of the Security to be Transferred				Account Number		
Registration/Title at 1	lssuer					
Quantity/Shares to Transfer				Security (Name, Symbol or CUSIP)		
Please confirm the transfer agent l	nas the correct SSN	TAX ID on file. The A	gent will reject the	e request if there is a m	nismatch of SSN/TAX ID.	
extent any assets in my/our account applicable regulations. I/we understrize the transferor to deduct any out	structions above, ple are not readily trans and I/we will be con standing fees due yon nsufficient to satisfy	ase transfer in-kind, a sferable with or witho tracted by the carryin ou from the credit bala any outstanding fees	II assets into my/ ut penalties; such g and/or receivin ance in my/our ac due you, I/we au	our account with your (a assets may not be trang g firm regarding any as acount. If my/our account thorize you to liquidate	st Sign) Clearing firm. I/we understand that to the insferred within the timeframes required besets that are not transferable. I/we authont does not contain a credit balance, or if the assets in my/our account to the exten	
Client Signature:		Date	Co-O	Co-Owner's Signature Date		
LETTER OF ACCEPTANCE	CE (FOR OFFIC	E USE ONLY)				
The undersigned organization o	grees to serve as	successor custodia	n for the accou	nt of the above-nam	ed individual, and as custodian,	
I/ we agree to accept the assets			<i>a</i> .		T	
Representative Print Na	Representative Print Name: Representative Sign		e Signature	·	Date:	

^{*}DRS Transfers are \$50 plus additional pass through fees if any. (DTC, transfer agent etc.)