



## Hudson Acquisition/BenefitGuard Retirement Savings Plan

### Rollover Contribution Form

#### STEP 1: PARTICIPANT INFORMATION

Participant's Name:

Social Security Number:

Date of Birth:

Street Address:

City:

State:

Zip Code:

Email Address:

Phone:

#### STEP 2: ROLLOVER DETAILS

Prior Plan Name or IRA Custodian:

Type of Plan/Account: ☐ Qualified Plan (incl. 401(k), profit sharing, money purchase, etc.) ☐ 403(b) ☐ 457 ☐ IRA

Estimated Rollover Amount: \$

If Rollover includes Roth Contributions, enter Roth basis amount here: \$

Note: If Hudson Acquisition/BenefitGuard Retirement Savings Plan does not permit Roth contributions, Roth rollovers will be rejected.

#### STEP 3: CERTIFICATION AND SIGNATURE

I certify that the information provided above is true and correct and that the rollover amount qualifies as an eligible rollover under the Internal Revenue Code. and that I have the power and authority to provide such information. I authorize implementation of the instructions set forth in this form. I understand that only certain types of accounts can be rolled into a qualified retirement savings plan.

Signature:

Printed Name:

Date:

Please keep for your records a copy of this form, the rollover check, your rollover distribution statement, and any other attachments.

Return the entire original package to:

BlueStar Retirement Services, Inc.  
Attn: Rollover Processing Department  
822 A1A N, Suite 211  
Ponte Vedra Beach, FL 32082