(Plan Name)

Vanguard Section 403(b)(7) Custodial Account

Vanguard Plan # 0

Asset Transfer Authorization

1. Employee Information

Social Security # ___ – ___ – ____

Name (Last, First, MI)

Address

City **State** **Zip**

Daytime Phone # ___ – ___ – ____ – ____

Check One: ☐ I am a new participant in Vanguard and have attached a completed enrollment form. ☐ I am an existing participant in my employer's plan at Vanguard.

2. Current Investment Company

Current Investment Company (Where your 403(b) account is presently). For transfers out of CREF, simply indicate "TIAA-CREF" below. For all other transfers, please provide the company's address. If you are transferring assets to Vanguard from more than one organization, you will need to complete separate forms. (This form cannot be used for TIAA Basic RA transfers. Please contact TIAA for form F6969.)

Name of Current Investment Company

Address

City State Zip

3. Account Information

Type of Account ☐ Basic ☐ Supplemental

Account/Fund Name

Account Number

Transfer Amount ☐ Entire Account ☐ Partial Account

☐ Employer Amount $

☐ Employee Pre-tax Amount $

If you are transferring assets to Vanguard from more than two accounts/funds please complete additional forms.

Type of Account ☐ Basic ☐ Supplemental

Account/Fund Name

Account Number

Transfer Amount ☐ Entire Account ☐ Partial Account

☐ Employer Amount $

☐ Employee Pre-tax Amount $

4. Investment Instructions to Vanguard

Please allocate my Asset Transfer, in whole percentages, to the Vanguard Fund(s) listed below.

Vanguard Portfolio Name	**Percentage**
1.	%
2.	%
3.	%
4.	%

Total must equal 100%

5. Acceptance

(a) **Individual Acceptance:** I hereby agree to the terms and conditions set forth in this Asset Transfer Authorization, and acknowledge having established a Vanguard Section 403(b)(7) Custodial Account through execution of an Enrollment form for a Vanguard Section 403(b)(7) Custodial Account. I hereby direct the investment company named in section 2 above to liquidate the designated amount of the account listed in Section 3, and to transfer the proceeds to my Vanguard Section 403 (b)(7) Custodial Account.

I also acknowledge that I have read the prospectus(es) for the Vanguard Fund(s) into which I am transferring my 403(b)(7) assets.

Individual Signature Date

(b) **Custodian Acceptance:** Vanguard Fiduciary Trust Company hereby agrees to accept the transfer described above and upon receipt will deposit the proceeds into the Vanguard Section 403(b)(7) Custodial Account established on behalf of the Individual.

Authorized Signature *Senior Vice President* Title

Vanguard, P.O. Box 1101, VM H20, Valley Forge, PA 19482

Please make a copy for your records.

(2/15/2006)

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