



Mail to: The IRA Club
 333 N Michigan Avenue
 Suite 2220
 Chicago, IL 60601
 Phone: (312) 795-0988

IRA Services Distribution Request

Return to: PO Box 7080, San Carlos, CA 94070-7080
 Telephone: (650) 593-2221

IRA Participant:

Name: _____

Social Security Number: _____

IRA Account Number: _____

DISTRIBUTION OF FUNDS:

I authorize IRA Services to withdraw the specified funds from my custodial cash account and send me a check for the net amount (less any withheld taxes) to my current address of record.

If sufficient cash is not available in the custodial cash account, you must advise IRA Services to liquidate the following:

Asset to be Liquidated: _____

Number of shares or amount to Liquidate: _____ shares or \$ _____

TYPE OF DISTRIBUTION: (Please check one)

- Mandatory distribution for the tax year: _____, I will be 70½ years old by the end of this tax year.
- Normal distribution, I am over 59½ years old.
- Premature distribution, I am under 59½ years old.
- Distribution to be rolled over to another IRA, I understand a penalty may be imposed if not deposited in 60 days.
- Distribution from a Coverdell Education Savings Account.

AMOUNT and FREQUENCY OF DISTRIBUTION:

- Distribute the following gross amount: \$ _____ OR Distribute interest only (check one)
- Frequency (check one): One Time Only Quarterly Monthly
- Start my distributions in (Month/Year): ____/____

FEDERAL INCOME TAX WITHHOLDING ELECTION: (Please check one)

- I want Federal Income Tax withheld from my distributions, \$50.00 minimum, as follows:
 Withhold exactly \$ _____ (whole dollars) OR Withhold _____% (whole percentage)
- I do NOT want Federal Income Tax withheld. (There may be penalties for not paying enough tax through withholding or estimated tax.)

STATE INCOME TAX WITHHOLDING ELECTION: (Please check one)

- I want State Income Tax withheld from my distributions, \$25.00 minimum: (IRA Services can only withhold from these states)
 Check a state: CA, GA, IA, KS, MA, ME, NC, OK, OR, VT
 Withhold exactly \$ _____ (whole dollars) OR Withhold _____% (whole percentage)
- I do NOT want State Income Tax withheld. (There may be penalties for not paying enough tax through withholding or estimated tax.)

ACKNOWLEDGEMENT:

As set forth in my IRA Services Custodial Agreement, I hereby elect and acknowledge the foregoing distribution. I understand that IRA Services and the Custodian neither assumes nor implies any liability for the failure of my elected distribution to meet any required minimum distribution requirements under the law and that the amount of the distribution is exclusively mine to make.

 (Signature of Participant)

_____/_____/_____
 (Date)