

Account Transfer Form

Use this form to transfer your current account to **Terra Nova Financial, LLC**, from another brokerage firm, bank or mutual fund company, or to transfer funds and/or securities from another financial institution into an existing **Terra Nova Financial, LLC** account. Please note that most account transfers take two to six weeks to complete, depending on the processing time of the delivering firm and the securities being transferred. Please confirm that you have completed the steps listed below prior to returning the form to **Terra Nova Financial, LLC**.

Print application and complete Sections 1 - 5.

- **Attach a copy of your most recent statement from the delivering firm for processing.**
- Be sure to complete a separate form for each account you would like to transfer.
- Sign and return this form via mail to:

Terra Nova Financial, LLC
New Accounts
100 S. Wacker Dr., Suite 1550
Chicago, IL 60606

1 Account Information (PLEASE NOTE: Registration must be identical to the registration on the account you are transferring)																				
Type of Terra Nova Financial, LLC account transferring to (please circle one): Brokerage Traditional IRA Roth IRA Rollover IRA		Terra Nova Financial, LLC Account Number																		
Name and Title of the account Being Transferred (as shown on your statement)		Account number at Delivering Firm																		
Account Holder Social Security Number		Joint Account Holder Social Security Number (if applicable)																		
Name of Firm	Address of Firm	City	State	Zip Code																
2 Brokerage Account Transfer (Please check one)																				
<input type="checkbox"/> I wish to transfer my entire account. (Please skip to Section 5.) <input type="checkbox"/> I wish to transfer only those assets listed below: (Attach additional pages if necessary.)																				
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Description of Asset</th> <th style="width: 40%;">Number of shares or "All"</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>		Description of Asset	Number of shares or "All"							<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Description of Asset</th> <th style="width: 40%;">Number of shares or "All"</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>			Description of Asset	Number of shares or "All"						
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3 Mutual Fund Transfer (PLEASE NOTE: Fund companies may assign an account number to each fund. If so, please copy form and complete one form for each fund account.)																				
Mutual Fund Name	Number of Shares or "All"	Type of Handling (check one) Sell Shares/ Transfer Cash Transfer Shares	Future and Capital Gains (check one) Reinvest Shares Cash	For Internal Use Only: Mutual Fund Re-Registration Instructions for Retirement Accounts C/F _____ Acct. # _____																
4 Bank, Savings & Loan, Credit Union Transfer, or Other (Please check one)																				
Please Transfer all cash in my account. _____ Please transfer only \$ _____.																				
<input type="checkbox"/> Liquidate CD immediately and transfer to cash. I am aware of and acknowledge any penalties I will incur from early withdrawal.																				
<input type="checkbox"/> Liquidate CD at maturity and transfer to cash. Maturity Date: _____ (Please submit this form 2 - 3 weeks before maturity date.)																				
5 Authorization Agreement and Signature(s) (If joint account, both account holders must sign.)																				
<p>Please transfer my securities account as indicated, to Terra Nova Financial, LLC (TNT), who has been authorized by me/us to make payment to you of the debit balance or to receive payment of the credit balance in my/our securities account I/we understand that to the extent any assets in my/our securities account are not readily transferable, with or without penalties, such assets may not be transferred within the time required by New York Stock Exchange Rule 412 or similar rule of the National Association of Securities Dealers, Inc. or other designated examining authority.</p> <p>Unless otherwise indicated in the instructions above, I/we authorize you to liquidate any proprietary money market fund assets that are in part of my/our securities account and transfer the resulting credit balance to TNT. I/we understand that you will contact me/us with respect to the disposition of any other assets in my/our securities account that are either non-transferable on non-deliverable. If certificates or other instruments in my/our securities account are in your physical possession, I/we instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable TNT to transfer them in its name for the purpose of sale, when and as directed by me/us. I/we further instruct you to cancel all open orders for my/our securities account on your books.</p> <p>I/we affirm that I/we have destroyed or returned to you any credit/debit cards and unused checks given to me/us in connection with my/our securities account.</p> <p>For Retirement Account: I acknowledge that Delaware Charter Guarantee & Trust Company reserves the right to review all assets being transferred prior to final acceptance as successor trustee. I authorize the resigning trustee to deduct any outstanding fees due to the resigning trustee from the credit balance in my account. If my account does not contain a credit balance, or if the credit balance in the account is insufficient to satisfy any outstanding fees due to the resigning trustee, I authorize the resigning trustee to liquidate the assets in my account to the extent necessary to satisfy any outstanding fees due to the resigning trustee.</p>																				
X _____ Signature of Account Holder		X _____ Signature of Joint Account Holder (if any)																		
Date (mm/dd/yyyy)		Date (mm/dd/yyyy)																		
For Internal Use Only																				
Letter of acceptance - To the prior custodian/trustee of the retirement account designated for transfer. Please be advised that Delaware Charter does hereby accept appointment as successor custodian.																				
Delivering Broker Clearing # _____																				
X _____ Custodian Authorized Signature		X _____ Contact Name		_____ Date (mm/dd/yyyy)																

Delivery Instructions

All deliveries must include account holder name and Terra Nova Financial, LLC account number

PHYSICAL DELIVERY OF SECURITIES

Terra Nova Financial, LLC
 100 South Wacker Drive
 Suite 1550
 Chicago, IL 60606

FED-WIRED MONIES

ABA #071000288
 Harris Trust and Savings Bank
 Account Number 4244620 - Terra Nova Financial, LLC
 111 West Monroe Street
 Chicago, IL 60690
 For the account of: Customer Account Name and Account Number

ALL DTC - ELIGIBLE SECURITIES

#0364

NSCC

#0364

OPTIONS DELIVERY INSTRUCTIONS

Please contact your registered representative to initiate a member to member transfer.