To Whom It May Concern:

Thank you for your inquiry regarding information related to redemption of assets from an account registered as a Self Trustee Retirement Plan or Third Party Administered (TPA) account.

In response to your request, we have included information regarding distribution of the account. Please refer to the chart below to determine the documents that will be required to process your requested transaction.

In addition to the document requirement, an original signature verification stamp obtained from an Approved Primerica OSJ Coordinator will be required. This stamp may be obtained from an Approved Primerica OSJ Coordinator and must be affixed to the request.

Documents Required	To Redeem With Approved Primerica OSJ Coordinator Signature Verification
Completed Distribution Form signed by the authorized trustee(s) and signature verification stamp provided by Approved Primerica OSJ Coordinator	\checkmark
Certified Copy of Retirement Plan Document certified within past 90 days	\checkmark

Please note that, if required, the certified copy of the Retirement Plan Document must list the officers by name who are authorized to act on behalf of the Retirement Plan. The Retirement Plan Document must have been certified within the past ninety (90) days. Original certification is required. A copy of the certification is not acceptable. The certification of this document may be obtained from a notary public or by raised seal from the company administering the retirement plan. The Redemption Form may not be signed by the same trustee certifying the Retirement Plan Document.

If you have questions, need additional information, or need assistance locating a Representative, please contact our Customer Service Department at 1-800-544-5445. Customer Service Representatives are available to assist you, Monday through Friday between 8 a.m. and 8 p.m. ET.

(THIS PAGE RETAINED BY THE TRUSTEE(S)

Please mail completed form and required documents to Primerica Shareholder Services, PO Box 534485, Pittsburgh, PA 15253 - 4485, or for express mail Primerica Shareholder Services, Attention: 534485, 500 Ross Street, 154-0520 Pittsburgh, PA 15262.

Please provide the owner's account number so that we may process your request.

REDEMPTION AMOUNT - Please indicate the amount you wish to redeem from your account. You have three choices:

- Redeem a set number of shares or All Shares The Trustee(s) may request a set number of shares or all assets to be redeemed, please check the box if you wish to receive the assets of the account by redeeming.
 Dollars To redeem a specific dollar amount from your account number, please provide the dollar amount you
- wish to redeem from the account.

<u>MAIL CHECK</u> – Please provide mailing instructions for your redemption check. We will process and mail your redemption check usually within two to three business days.

- To me as identified on my account registration To have the check sent to the address and registration of record.
- To the following Payee and / or address To have the check sent to alternate payee and / or address. (Original PR OSJ Coordinator Signature Verification Required)

<u>EXPRESS MAIL</u> – Please indicate if you wish to receive the check via express mail service. A daytime telephone number is required for all express mail packages. A signature will be required upon receipt of all express mail packages.

 By one-day air express and deduct the fee charge from my account – The check will be sent via next-day air express in accordance with the mailing instructions.

Note: The overnight express fee is generally \$20 for most deliveries in the United States, however, if you reside in a rural area in the U.S. the charge could be higher. If you reside in Alaska, Hawaii, Puerto Rico or request overnight express to a PO Box, the overnight fee will be higher and you could be charged as much as \$30.00. If you request overnight express to Guam, the fee charge could be as much as \$70 or more. **Your account will be charged accordingly.**

<u>WIRE TRANSFER</u> – A Wire Transfer should take place within 48 to 72 hours of processing your request for a redemption.

<u>ACH TRANSFER</u> -- An Automated and Clearing House (ACH) transfer should place within 72 to 96 hours of processing your request for distribution of shares.

Please complete the Wire / ACH Transfer Information and attach a voided check.

- Wire / ACH Transfer to the bank of record To have the distribution proceeds Wired / ACH to the same account the bank draft option is being deducted from.
- Wire / ACH Transfer to a non-record bank To have the distribution proceeds sent to a bank account not on file with Primerica Shareholder Services. When processing a Wire / ACH Transfer to a non-record bank, you must complete the bank name, bank contact person, bank telephone number, bank routing / transit number, bank account name and number, and attach a voided check.

<u>SIGNATURE</u> – All authorized trustees must sign the request as their names appear in the Retirement Plan Document. Please provide a daytime phone number where you can be reached should we need additional information to process your request.

<u>SECTION 4 - SIGNATURE VERFICATION</u> – The approved PR OSJ Coordinator's signature and signature verification stamp. An original signature verification from an Approved Primerica OSJ Coordinator in a Primerica office in Puerto Rico. <u>Please note that a notary public cannot provide a signature guarantee/verification</u>. A signature verification is a warranty by the OSJ Coordinator that the account owner's signature is genuine, and that the person(s) signing is competent and authorized to sign.

Account Number:

(Required to complete transaction)

OSJ Signature Verification Stamp

Account Owner's Name:

1. Tell us how to process your redemption:

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I would like to receiv	e: (choose one)				
	Fund Number/	# of Shares	\$ Dollar Amount		
All Shares in	NASDAQ Symbol	#	\$		
		#	\$		
		#	\$		
All shares in All	Fund Positions				
2. Please mail th	e check to: (choose on	e)			
The address o		_	e payee/address:		
Name(s):	Tregistration		payee/address.]	
Address:					
City:		State:	Zip:		
I would like to receive	a check: (choose one)				
1 st Class Mail Next Day Air (Read note regarding fee on instruction page)					
Daytime phone number required for Express Mail Service					
<u>I would like to wire transfer: (choose one)</u>					
To the active bank of record at PSS To an alternate bank account					
I would like to ACH	l transfer: 🔲 To the	active bank of reco	rd 📃 To an alternate ba	nk account	
3. Trustee Signa	ture:				
-					
Authorized Trustee Signature Date Authorized Trustee Signature Date					
Daytime phone number w	here you can be reached	should we need additi	onal information:		
4: Approved Primerica	OSJ Signature and Ve	erification Stamp			
AUTHORIZED OSJ COORDINATOR SIGNATURE DATE					
POL-PR90					

WIRE/ACH TRANSFER - BANK ACCOUNT INFORMATION

Bank Name	Account Name
Contact Person	Phone #
Routing #	Account #

Please check with your financial institution for any special wiring instructions required to process a wire transfer to your bank account. Some financial institutions clear transactions through other institutions. This will cause a problem in processing the wire if your bank does not accept direct wires, but uses a pay through institution.