

IRA/Education Savings Account Transfer Form

Complete this form to transfer funds from existing IRAs or Education Savings Accounts to *Wells Fargo Advantage Funds*®. Enclose a copy of your most recent statement or Certificate of Deposit (CD). **To convert a Traditional IRA to a Roth IRA, complete a *Wells Fargo Advantage Funds* Roth IRA Conversion Form.** To perform a direct rollover from a qualified plan or 403(b), please contact your current custodian or plan administrator for the appropriate paperwork. If you have questions, call our IRA Specialists at **1-800-222-8222**.

P.O. Box 8266 | Boston, Massachusetts 02266
www.wellsfargo.com/advantagefunds

1 REGISTRATION AND MAILING ADDRESS (PLEASE PRINT)

_____ Name of Account Owner (first, middle initial, last)	_____ Social Security number	_____ Date of birth	
_____ Name of Guardian (if Owner is a minor)			
_____ U.S. residential street address	_____ City	_____ State	_____ Zip code
_____ E-mail address	_____ Daytime phone	_____ Evening phone	

2 EXISTING ACCOUNT INFORMATION

Your current custodian or your plan administrator may require additional documents.

A. Choose one:

Transfer request between like accounts

- Traditional IRA
- Roth IRA
- SEP-IRA
- SIMPLE IRA
- Education Savings Account (ESA)

Transfer request from SIMPLE IRA to Traditional IRA

Note: Only available if you have participated in a SIMPLE IRA for more than two years.

Direct rollover request from your qualified retirement plan or 403(b) plan

Choose one:

- The required paperwork from my plan administrator has been completed and forwarded to my employer.
- I have included a copy of the paperwork required by my plan administrator for your reference.
- Forward the enclosed paperwork required by my plan administrator to the address referenced in 2B of this form.
- No additional paperwork is required.

B. Complete the information below and include a copy of your current account statement.

_____ Name of current IRA Custodian or Qualified Plan Administrator	_____ Phone number for Custodian/Plan		
_____ Custodian or Plan Administrator's mailing address	_____ City	_____ State	_____ Zip code
_____ Name on account	_____ Account number or CD number	_____ Maturity date (if applicable)	

3 INSTRUCTIONS TO CURRENT IRA CUSTODIAN OR PLAN ADMINISTRATOR

Consider this your authorization to send my IRA, ESA, or my distribution from my qualified retirement plan or 403(b) plan to *Wells Fargo Advantage Funds*. **Sell all assets immediately if no selection is checked below:**

1. **SELL** or **TRANSFER-IN-KIND** (Confirm that your current plan offers the option to transfer funds between accounts with identical registrations before selecting this option.)
 - all of my assets in section 2 of this form, **or**
 - partial: \$_____ or _____% of my assets in the account referenced in section 2 of this form (provide this figure as a dollar amount or as a percentage of the total value of your distribution). **Note:** If there is a discrepancy in dollar amounts to be transferred between sections 3 and 4 of this form, the directions provided in section 3 will be followed.
2. **SELL** immediately, **or**
 at maturity. Maturity date _____ (month/day/year)

Note: There may be penalties for withdrawing certain investments before their maturity. Contact your current custodian or plan administrator to determine the applicable penalty, if any. Send all transfer requests **at least three weeks before maturity** to allow for proper time limitations.

If you are age 70 1/2 or older, contact your current custodian to satisfy this year's Required Minimum Distribution (RMD) before your transfer is made.

4 FUND SELECTIONS

A *Wells Fargo Advantage Funds* IRA Application, a SIMPLE IRA Application, or a Coverdell Education Savings Account Application must be completed to process this transfer if a new account is being established. The Fund(s) and the allocation(s) specified on the new account application will be used if they are different from those indicated below. Note: Percentages must be listed as whole numbers only.

Investment Allocation

_____	\$ _____	or	_____ %
Fund and account number (write "New Account" if new)			
_____	\$ _____	or	_____ %
Fund and account number (write "New Account" if new)			
_____	\$ _____	or	_____ %
Fund and account number (write "New Account" if new)			
_____	\$ _____	or	_____ %
Fund and account number (write "New Account" if new)			
_____	\$ _____	or	_____ %
Fund and account number (write "New Account" if new)			

5 SIGNATURES

I authorize Boston Financial Data Services, the Fund's transfer agent, to act on my behalf in contacting the current custodian or plan administrator to facilitate the transfer of assets.

Sign and date here.

X _____

Signature of Owner or Guardian (if IRA Owner is a minor) Print name Date

Affix Medallion stamp here:

X _____

Medallion Guarantee* (for transfers from another custodian)

Important: Contact your current custodian to determine if a Medallion Guarantee is required.*

* A **Medallion Guarantee** may be obtained from any eligible guarantor institution, as defined by the Securities and Exchange Commission. These institutions include banks, savings associations, credit unions, and brokerage firms. The words "**MEDALLION GUARANTEED**" must be stamped or typed near **each** of the signatures being guaranteed. The guarantee must appear with the name of the guarantor institution and the printed name, title, and signature of an officer of the guarantor institution. **Note that a Notary Public stamp or seal is not acceptable.**

Before you mail, have you:

Completed an IRA Application, a SIMPLE IRA Application, or a Coverdell Education Savings Account Application if the transfer or direct rollover is going into a new account?

Included documents from your current custodian or plan administrator, if required?

Signed the application in section 5?

For Wells Fargo Advantage Funds use only:

The Custodian of the Wells Fargo Advantage Funds IRA/ESA will complete this acceptance agreement.

As Custodian of the *Wells Fargo Advantage Funds* IRA/ESA, we (State Street Bank and Trust Company or any successor hereto) will accept the IRA/ESA transfer or direct rollover requested. To ensure proper credit, return a copy of this form with the check.

Make check payable to Wells Fargo Advantage Funds, FBO [Client's name], P.O. Box 8266, Boston, MA 02266-8266.

X _____

Signature of Authorized Custodian Date

Wells Fargo Funds Management, LLC, a wholly owned subsidiary of Wells Fargo & Company, provides investment advisory and administrative services for *Wells Fargo Advantage Funds*. Other affiliates of Wells Fargo & Company provide subadvisory and other services for the Funds. The Funds are distributed by **Wells Fargo Funds Distributor, LLC**, Member FINRA/SIPC, an affiliate of Wells Fargo & Company. 107649 12-07

NOT FDIC INSURED • NO BANK GUARANTEE • MAY LOSE VALUE