



Request for Transfer Between Accounts

Part 1 – Account Information

Organization name _____

Please complete the following information:

Transfer from account number _____

Transfer from fund* (please specify) _____

Transfer to account number _____

Transfer to fund* (please specify) _____

Transfer amount _____

Please note: Wespath provides daily investment pricing, and account balances fluctuate accordingly. A transfer request will be honored if the account contains a sufficient balance. If your transfers, rebalances or withdrawals, including recurring transactions, total more than \$2 million for any one day, these transactions may be placed on hold for processing for up to 15 business days regardless of the amount or transaction type.

Wespath will notify the investor of the transaction processing date, on which, the transaction will be processed using the fund unit price calculated on the processing date. Transactions will be reflected in your account one day following the processing date.

** This transfer request must specify the accounts and investment funds to be used.*

Part 2 – Signature

Print name** of signatory _____

Title _____

Signature on behalf of account holder _____

Date _____

*** Name must appear on the Signature Authorization Card.*

If you are **NOT** completing this document online, please complete it and return to Wespath by one of the following methods:

- E-mail (scanned copy) to **support@wespath.org** or
- Fax to **1-847-866-4894** or
- Mail to Wespath Benefits and Investments
Plan Sponsor Relations
1901 Chestnut Avenue, Glenview, IL 60025

Be sure to keep a copy for your records.

This form includes and/or is requesting personally identifiable information (PII) and/or protected health information (PHI). You are encouraged to make elections and beneficiary designations online at **benefitsaccess.org**. When possible, managing your benefits online is the recommended approach to keep your PII and PHI safe and secure.