

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 as long as the account contains a sufficient balance. A transfer request of more than \$2 million may take up to 15 days to process.

** 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.*

▶ Make transfers online at **wespath.org**, scan and e-mail this form to **support@wespath.org**, fax this form to **1-847-866-4894** or mail it to the following address:

Attention:
Plan Sponsor Management Team
Wespath Benefits and Investments
1901 Chestnut Avenue
Glenview, IL 60025-1604