

EMPLOYEES' RETIREMENT SYSTEM OF RHODE ISLAND  
40 Fountain Street, 1<sup>st</sup> Floor  
Providence, RI 02903 - 1854  
Office (401) 222-2203, Fax (401) 222-2430

## AGREEMENT OF TRUSTEE/CUSTODIAN

**Instructions: Please print or type in black ink. If the member is transferring contributions, the Member Information and Agreement of Trustee/Custodian sections must be completed. If spouse of deceased member is transferring contributions, Spouse of Deceased Member Information and Agreement of Trustee/Custodian sections must be completed. Return this original form. We will not accept your acceptance/transfer form.**

### MEMBER INFORMATION

FIRST NAME	MI	LAST NAME	SOCIAL SECURITY NUMBER
ADDRESS			HOME PHONE NO
			BUSINESS PHONE NO
CITY	STATE	ZIP CODE	
SIGNATURE OF MEMBER		DATE (mm/dd/ccyy) / /	

### SPOUSE OF DECEASED MEMBER INFORMATION

SOCIAL SECURITY NUMBER		DATE OF BIRTH (mm/dd/ccyy)	
FIRST NAME	MI	LAST NAME	
ADDRESS			HOME PHONE NO
			BUSINESS PHONE NO
CITY	STATE	ZIP CODE	
SIGNATURE OF SPOUSE OF DECEASED MEMBER		DATE (mm/dd/ccyy) / /	

### AGREEMENT OF TRUSTEE/CUSTODIAN

In accordance with the authorization of the depositor, we agree to deposit the forthcoming rollover amount from the Employees' Retirement System of Rhode Island in the following account: (CHECK ONE)

Annuity       IRA       Other Qualified Plan

NAME OF TRUSTEE/CUSTODIAN		INDIVIDUAL'S ACCOUNT NUMBER	
ADDRESS			
ADDRESS			
CITY	STATE	ZIP	
TRUSTEE/CUSTODIAN SIGNATURE (REQUIRED)			DATE (mm/dd/ccyy) / /
TAX IDENTIFICATION NUMBER (Not Required)			

**INSTRUCTIONS FOR COMPLETING  
AGREEMENT OF TRUSTEE/CUSTODIAN**

**Member Information.**

To be completed and signed by the member as applicable.

**Spouse of Deceased Member Information.**

To be completed and signed by the spouse of the deceased member as applicable.

**Agreement of Trustee/Custodian.**

To be completed by an authorized employee of the applicable Trustee/Custodian.

NOTE TO TRUSTEE:

RETURN THIS ORIGINAL FORM. WE CAN NOT ACCEPT YOUR  
ACCEPTANCE/TRANSFER FORM.

Mail To:

EMPLOYEES' RETIREMENT SYSTEM OF RHODE ISLAND  
40 FOUNTAIN STREET, 1<sup>ST</sup> FLOOR  
PROVIDENCE, RI 02903-1854