



IRA TRANSFER REQUEST

For IRA (Direct Transfer) Only.

PARVIN HEDGED EQUITY SOLARI WORLD FUND

Mail To

Parvin Fund
c/o Mutual Shareholder Services
8000 Town Centre Drive, Suite 400
Broadview Heights, OH. 44147

Fax To

440-526-4446

For Assistance

866-458-4744

INVESTMENT MINIMUM

Initial

\$1,000

Subsequent

\$ 50

- Use this form for an IRA (Direct Transfer) only, which means a transfer from the same IRA type (or like-titled account).
- To make a deposit into an account at Parvin Fund, ONLY cash is accepted. Please liquidate desired investment amount to cash prior to submitting this IRA Transfer Request form.
- Include with this form: completed IRA Application and recent account statement from current custodian / trustee.

1 ACCOUNT OWNER (please print)

Owner Name (First, Middle Initial, Last)

Street Address (no P.O. Box)

City

State

Zip

Primary Phone Number

Secondary Phone Number

2 CURRENT CUSTODIAN / TRUSTEE

Account Number

Custodian/Trustee Name

Street Address

City

State

Zip

Phone Number

3 PARVIN FUND ACCOUNT (select one)

- New Parvin Fund Account:** I am opening a new account and have attached an IRA Application.
- Existing Parvin Fund Account:** Please deposit into my existing IRA.

Parvin Fund Account Number

4 AUTHORIZATION FOR TRANSFER (select one)

To current custodian or trustee: if the investment amount below has not been liquidated, please liquidate immediately.

The entire balance (or)

\$ _____
Investment Amount

5 PROCESSING OPTIONS FOR CURRENT CUSTODIAN / TRUSTEE (select one)

- Submit via Fax to:**
- Fax Number (current custodian or trustee)
- Important Note:** Please verify current custodian / trustee accepts faxed requests prior to selecting this option.
- Submit via Regular Mail to:** current custodian / trustee Name and Address provided in Section 2.

6 DELIVERY OPTIONS FOR CURRENT CUSTODIAN / TRUSTEE (select one)

- Check via Regular Mail:** Make check payable to:
Parvin Fund FBO _____
Client Name
- Mail Check To:** Parvin Fund, c/o Mutual Shareholder Services, 8000 Town Centre Drive, Suite 400, Broadview Heights, OH 44147
- Wire Transfer:** Instructions will be sent by Mutual Shareholder Services (current custodian / trustee may charge fee for wire)

7 AUTHORIZATION SIGNATURE

Account Owner Printed Name

Account Owner Signature

Date



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8 MEDALLION SIGNATURE GUARANTEE (if required)

Your resigning trustee may require your signature guaranteed. A signature guarantee requires you to sign your name in the presence of an officer of a commercial bank or trust company, a savings or loan association or a member firm of a domestic exchange. The officer will verify your signature at that time. Please note that a notary public is not acceptable for signature guarantee.

Signature Guarantee By:

Name of Bank or Firm

Title of Officer

Signature of Officer