

403(b) Exchange Form

Use this form to initiate an exchange (or transfer) of 403(b) funds from a previous investment provider to another within your employer's 403(b) retirement plan. Please contact both investment providers to ensure any requirements are met to surrender and receive this exchange. Though an exchange is generally not a taxable event, we recommend you first speak with a financial or tax advisor regarding the consequences of any transaction. **Please return 1) this form and 2) the transaction form from the surrendering investment provider** to PERA Administrators at **Support@peradministrators.com** or fax to **725.485.4857**.

Employer Name

Employee Name		Social Security Number
Address		
City	State	Zip Code
Date of Birth	Email Address	Phone
Agent Name	Agent Email	Agent Phone

Assets are moving out of this 403(b) account. Note that some investment providers require payment of fees, surrender charges or completion of their own forms to perform an exchange:

Previous investment provider name		Account number
Phone	Fax	
Address		
City	State	Zip Code

Account receiving the funds. Please contact your receiving investment provider as they may have specific requirements or forms to accept the exchange.

Receiving investment provider name		Account number
Phone	Fax	
Address		
City	State	Zip Code

Check this box if the exchange is to purchase service credits from a state pension plan

Employee Signature	<input type="text"/>	Date	<input type="text"/>
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