GlobaLink SECURITIES, INC
Member NASD, SIPC
234 E. Colorado Blvd, Ste 750 Pasadena, CA 91101 U.S.A.
Phone(626)964-5966 Fax (626)964-5926

Account Transfer Form

GLOBALINK SECURITIES HAS ENGAGED WEDBUSH MORGAN SECURITIES ("WMS") AS ITS CLEARING AGENT FOR CARRYING THIS ACCOUNT ON YOUR BEHALF PURSUANT TO A CORRESPONDENT BROKER AGREEMENT BETWEEN WMS AND GLOBALINK SECURITIES. ACCORDINGLY, WMS WILL PROVIDE CASHIERING SERVICES; MONITOR COMPLIANCE OF CREDIT ACCORDING TO APPLICABLE RULES AND REGULATIONS AND WMS POLICIES; PREPARE OR PROVIDE INFORMATION FOR TRANSACTION CONFIRMATIONS; PROVIDE PREIODIC ACCOUNT STATEMNETS; AND PROVIDE FOR THE DISSEMINATION OF PROXY, TENDER OFFER AND OTHER SIMILAR SHAREHOLDER'S MATERIALS. IN ADDITION, WMS MAY PROVIDE, UPON SPECIFIC INSTRUCTIONS FROM YOUR SECURIITIES DEALER, EXECUTION OF ORDERS AND/OR CERTIFICATE CLEARANCE. WMS WILL NOT BE INVOLVED WITH OR HAVE RESPONSIBILITY FOR DECISIONS REGARDING TRANSACTIONS IN THIS ACCUNT. YOUR SECURITIES DEALER IS RESPONSIBLE FOR ALL ACTIVITIES CONCERNING THIS ACCOUNT. INQUIRIES, COMPLAINTS, INSTRUCTIONS AND NOTICES OF ADDRESS CHANGE SHOULD BE DIRECTED PROMPTLY TO THE ATTENTION OF YOUR SECURITIES DEALER.

Type Of Transfer

1. (*Check one*)	2. (*Check one*)	3. (*Check one only) Complete Sections*	(WMS Completes)	Wedbush Morgan Securities Clearing Number
☐ **Total Transfer**	☐ **Cash/Margin**	☐ **Brokerage Transfer …… ..A,B,C,F**	☐ ACAT	
	☐ **IRA**	☐ Bank / Insurance Transfer ..A,B,D,F	☐ Non-ACAT Full	
	☐ **Roth IRA**		☐ Partial	
☐ **Partial Transfer**	☐ **Qualified Plan**	☐ **Mutual Fund Transfer ……A,B,E,F**	☐ Mutual Fund	**0103**
			☐ Broker Change	
			☐ In-House	

A. Information About Your Account Maintained By Wedbush Morgan Securities (Re: Receiving Firm)

Account Title	
Account Number	SSN/ TIN

B. Information About The Account You Are Transferring (Re: Delivering Firm)

Name of Firm	Account Number	Clearing Number
Firm Address (Complete only if Bank or Mutual Fund transfer)	Account Title (Name and plan as It appears on statement)	

C. Brokerage Firm Transfer

☐ **I wish to transfer my entire account** *(Skip to Section F)*

☐ I wish to transfer only the following assets from my account *(Indicate assets below)* ☐ **Check here is assets come from a Qualification Plan**

Quantity or Cash	Description of Asset (Attach additional sheet, if necessary)	Action	
		☐ **Liquidate & Transfer Proceeds**	☐ **Transfer In-Kind**
		☐ **Liquidate & Transfer Proceeds**	☐ **Transfer In-Kind**
		☐ **Liquidate & Transfer Proceeds**	☐ **Transfer In-Kind**

D. Bank, Savings & Loan, Insurance Or Credit Union Transfer

Cash Transfer	*CD / Annuity Transfers*
☐ **All Cash in Account**	☐ **Liquidate IMMEDIATELY. I am aware of and acknowledge the penalty I will incur for early withdrawal.**
☐ **Only $ _____**	☐ **Liquidate at MATURITY (Please submit 2-3 weeks before maturity date)** **Maturity Date _____/_____/_____ Month Day Year**

E. Mutual Fund Transfer (Please use a separate original form for each mutual fund company)

Name of Fund		☐ **Liquidate and Transfer Proceeds** ☐ **Transfer / Registration**
Dividend / Capital Gains Option ☐ **All Reinvest** ☐ **All Cash** ☐ **Dividend-Cash, Capital Gains – Reinvest** ☐ **Dividend – Reinvest, Capital Gains-Cash** ☐ **Deposit To New Plan** **# _____**	**Print Name of Correspondent Broker / Dealer** _____ **(Correspondent Broker / Dealer for which WMS acts as clearing broker)** **IE Name** _____ **IE # _____**	**IRA / Qualified Registration Wedbush Morgan Securities** **FBO _____ (Customer Name)** **Acct # _____ (Wedbush Acc#)** **TAX ID: 95-4323351**

F. Please sign This Section (Customer)

TO DELIVERING FIRM: IF THIS ACCOUNT IS A QUALIFIED RETIREMENT PLAN ACCOUNT, I HAVE AMENDED THE APPLICABLE PLAN SO IT NAMES MWS AS SUCCESSOR CUSTODIAN. UNLESS OTHERWISE INDICATED IN THE ABOVE, PLEASE TRANSFER ALL ASSETS IN MY ACCOUNT TO WMS. I UNDERSTAND THAT TO THE EXTENT ANY ASSESTS IN MY ACCOUNT ARE NOT READILY TRANSFERABLE (WITH OR WITHOUT PENALITIES), SUCH ASSETS MAY TAKE A LONGER PERIOD OF TIME TO TRANSFER THAN THE STANDARD TIME FRAMES REQUIRED BY VARIOUS REGULATORY BODIES. WITH RESPECT TO NONTRANSFERABLE ASSETS, I AUTHORIZE YOU TO LIQUIDATE ANY NONTRANSFERABLE ASSETS THAT ARE PART OF MY ACCOUNT AND TRANSFER THE RESULTING CREDIT BALANCE TO WMS. I AUTHORIZE YOU TO DEDUCT ANY OUTSTANDING FEES DUE YOU FROM THE CREDIT BALANCE IN MY ACCOUNT. IF MY ACCOUNT DOES NOT CONTAIN A CREDIT BALANCE, OR IF THE CREDIT BALANCE IN THE ACCOUNT IS INSUFFICIENT TO SATISFY ANY OUTSTANDING FEES DUE YOU, I AUTHORIZE YOU TO LIQUIDATE THE ASSETS IN MY ACCOUNT TO THE EXTENT NECESSARY TO SATISFY THAT OBLIGATION. IF CERTIFICATES OR OTHER INVESTMENTS IN MY ACCOUNT ARE IN YOUR PHYSICAL POSSESSION, I INSTRUCT YOU TO TRANSFER THEM IN GOOD DELIVERABLE FORM, INCLUDING AFFIXING ANY NECESSARY TAX WAIVERS, TO ENABLE WMS TO REGISTER THEM IN ITS NAME FOR THE PURPOSE OF SALE, WHEN AND AS DIRECTED BY ME. I UNDERSTAND THAT UPON RECEIVING A COPY OF THIS TRANSFER FORM, YOU WILL CANCEL ALLOPEN ORDERS FOR MY ACCOUNT ON YOUR BOOKS. I AFFIRM THAT I HAVE DESTROYED OR RETURNED TO YOU CREDIT/DEBIT CARDS AND/OR UNUSED CHECKS ISSUED TO ME IN CONNECTION WITH THIS ACCOUNT. I UNDERSTAND THAT YOU WILL CONTACT ME WITH RESPECT TO THE DISPOSITION OF ANY ASSET IN THIS ACCOUNT WHICH IS NONTRANSFERABLE.

IMPORTANT: Please be sure to attach a complete copy of the latest statement of the account you are transferring to WMS

X Customer Signature	**Date (Muse be completed)**	*(For WMS only – Medallion Signature Stamp)*
X Joint Account Holder Signature	**Date (Must be completed)**	

Delivering Firms: Please refer to the reverse side of this form for the delivery instructions

Wedbush Morgan Securities Letter of Acceptance

Wedbush Morgan Securities was approved as a non-bank custodian for IRA and Keogh assets on December 28, 1984. If this transfer involves a retirement account, we are prepared to accept this transfer of IRA / Keogh assets which is to be executed from fiduciary to fiduciary and will not place the participant in actual receipt of all or any part of their IRA / Keogh assets.

Successor Custodian Authorized Signature _____ _____/_____/_____
Month Day Year