

<b>HSA TRANSFER REQUEST</b> 	<b>RECEIVING HSA</b> <input type="checkbox"/> TRUSTEE <input checked="" type="checkbox"/> CUSTODIAN Lake Shore Savings Bank 4950 MAIN STREET  SNYDER, NY 14226-4071 (716)898-2101
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The *HSA Transfer Request* gathers information about a HSA direct transfer, authorizes the existing Trustee/Custodian to transfer the funds, and provides details regarding the investment liquidation.

<b>Type of Transfer:</b> <input type="checkbox"/> MSA or HSA to HSA <input type="checkbox"/> Traditional IRA or Roth IRA to HSA*	<b>Receiving HSA Plan Number:</b>
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\*Note: A contribution transferred directly from a Traditional IRA or a Roth IRA as tax-free qualified HSA funding distribution is subject to HSA contribution limits and other eligibility restrictions. Qualified HSA funding distributions are reported to the IRS as HSA contributions. Please consult your tax advisor to discuss potential tax consequences that could result if a qualified funding HSA distribution is ineligible or you do not remain eligible for the required period of time.

**DISTRIBUTING HSA OWNER INFORMATION**

Name:	Taxpayer ID Number:	D.O.B.:
Mailing Address:	Primary Phone:	Email Address:

Check to indicate that the mailing address is different than the HSA Owner's residential address.

**TRANSFER INSTRUCTIONS**

Transfer By:     HSA Owner     Spouse Beneficiary

Name:	Taxpayer ID Number:
Address:	D.O.B.:

**Current HSA Trustee/Custodian**

Name of HSA Trustee/Custodian:	Current HSA Account/Plan Number:
Address:	Branch Reference Number:
Phone:	

Transfer Amount:     The entire HSA balance.     A portion of the HSA as follows:

Investment Description	Amount/No. Shares	Transfer-
		<input type="checkbox"/> Immediately <input type="checkbox"/> At Maturity <input type="checkbox"/> In-kind <input type="checkbox"/> Other: <input type="checkbox"/> Immediately <input type="checkbox"/> At Maturity <input type="checkbox"/> In-kind <input type="checkbox"/> Other: <input type="checkbox"/> Immediately <input type="checkbox"/> At Maturity <input type="checkbox"/> In-kind <input type="checkbox"/> Other:

Transfer Method:     Mail a check made payable as follows: \_\_\_\_\_ as the HSA

Lake Shore Savings Bank     Trustee     Custodian for the benefit of \_\_\_\_\_ HSA.  
 4950 MAIN STREET  
 SNYDER, NY  
 14226-4071

Send a wire transfer as follows: \_\_\_\_\_ Routing Number: \_\_\_\_\_  
 Account Title: \_\_\_\_\_ Account Number: \_\_\_\_\_

**Special Instructions:**

**ACKNOWLEDGMENT**

By signing this *HSA Transfer Request*, I certify that the information I have provided is true and correct and I authorize the Trustee/Custodian to transfer the HSA as instructed above. I understand that I am responsible for ensuring I am eligible to authorize this transfer and I assume all responsibilities for any consequences as a result of my actions. If the contribution contains dollars directly transferred from an IRA as a qualified HSA funding distribution, I irrevocably designate this deposit as a qualified HSA funding distribution. I will indemnify and hold the Trustee/Custodian harmless from any consequences related to executing my directions. I have been advised to seek competent legal and tax advice and have not been provided any such advice by the Trustee/Custodian. The Trustee/Custodian agrees to accept this transfer as instructed above.

Signature of HSA Owner (or <input checked="" type="checkbox"/> other Authorized person) _____ Date _____	Signature of Receiving HSA Trustee/Custodian Representative _____ Date _____	Richard Greco _____
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