

HSA Tools Health Savings Account (HSA) Transfer Request Form

Instructions: Please review, complete and sign this document. Submit it to your current Administrator to transfer HSA Custodial designation and funds to UMB Bank, n.a.

If Assurant Health serves as your current administrator, submit this signed document to: Assurant Health HSA Department, P.O. Box 3015, Milwaukee, WI 53201-3015, or fax to 1-414-299-8493. If you have any questions, contact the Assurant Health HSA Department at 1-800-800-1212 x8886.

Customer Information

Name Street Address City, State, Zip

Current Administrator

Name Account Number

Street Address City, State, Zip

Authorization & Acceptance

UMB Bank, na. has agreed to serve as Custodian of a Health Savings Account (within the meaning of IRC Section 223) for the individual identified above, and is willing to accept the assets you are presently holding as fiduciary of said HSA in accordance with the following instructions. I request the transfer of my current assets to UMB Bank at UMB Bank HSA Processing Department, P.O. Box 219329, Kansas City, MO 64121-9329.

Please be advised that the individual identified below will establish an HSA with UMB Bank, n.a. and by his/her signature below is aware of and has read the following:

In the case of a tax-free transfer, the transfer is made directly between the fiduciaries that are the trustees, custodians, etc. of the HSA. If I receive a distribution from another HSA I may make a tax-free rollover contribution of all or part of the assets I receive to my UMB Bank n. a. HSA, provided that I complete the rollover within 60 days of the date I receive the distribution. I may make only one rollover during any 12-month period.

I authorize the transfer of my account balance according to the instructions provided above and the withholding of fees to establish the new account. I certify that I am eligible to complete this transaction within the limits prescribed by the Internal Revenue Service. I also certify that all information provided by me is correct and may be relied upon by UMB Bank, n.a.

Account holder's signature Date

