

## TRANSFER REQUEST

Use this form to transfer units from one GET account to another. **The maximum lifetime limit per individual student is 800 units.** The student receiving units must be a family member of the student transferring units. According to the IRS, family members include spouses, parents/stepparents, siblings/step-siblings, aunts/uncles and first cousins. For a complete list of eligible family members, please review IRS Publication 970 or call us. If you are transferring units to a different account owner a Notary signature is required and you must mail an original, notarized form, along with the required signatures noted below, to complete your request. E-signatures are not accepted. Faxed or photocopied forms are accepted for transfers that do not require a Notary. **You can complete a transfer request using your online account if you are the account owner on both accounts.**

### Account Owner Information

Name (First, Middle, Last, Suffix) \_\_\_\_\_ SSN or TIN \_\_\_\_\_  
 Street Address/Apartment Number \_\_\_\_\_ Email Address \_\_\_\_\_  
 Post Office Box Number \_\_\_\_\_ Phone Number \_\_\_\_\_  
 City/State/ZIP \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_

### Unit Transfer Information (Units must be 2 years old before they can be transferred)

Transfer **From:** \_\_\_\_\_  
 GET Account Number \_\_\_\_\_ Student Beneficiary's Name \_\_\_\_\_  
 Transfer **To:** \_\_\_\_\_  
 GET Account Number \_\_\_\_\_ Student Beneficiary's Name \_\_\_\_\_

**Please choose one - (The maximum lifetime limit per individual student is 800 units.)**

- ☐ Partial unit transfer / number of units to transfer: \_\_\_\_\_  
☐ Transfer all units and close this account.

If you have a Custom Monthly Contract that is not paid in full, call the Contact Center at 800.955.2318 for your options.

### Account Owner's Signature - Required

Forms must be signed by hand. E-Signatures will NOT be accepted.

By signing this form, I hereby certify and acknowledge that: I am the Account Owner and the information in this form is true, complete and accurate. I authorize GET, its agents and affiliates to act on instructions in this form believed to be genuine and from me. I authorize these requested changes to my Account.

**Account Owner's Signature** Must be 18 or older & Notary must witness signature (as noted below)

**Date** (must match date of Notary)

### Notary Section - (Only required when units are being transferred to a different Account Owner)

I certify that I know or have satisfactory evidence that (NAME) \_\_\_\_\_ is the person who appeared before me, and said person acknowledged that they signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes mentioned in the instrument.

**Date** \_\_\_\_\_  
 (must match date of Account Owner)

**Notary Signature** \_\_\_\_\_

**Printed Name** \_\_\_\_\_

(Seal or Stamp)

**County of** \_\_\_\_\_

**Title** \_\_\_\_\_

**State of** \_\_\_\_\_ **My Appointment Expires** \_\_\_\_\_

(Notary signature and name on seal must match exactly. Electronic Notary will not be accepted.)