

Current Date: [Insert Date]

[Your Name]
[Your Address]
[Your City, State, Zip Code]
[Your Phone Number]
[Your Social Security Number - Optional/As Required]

To: [Current Financial Institution Name]
Attn: Distributions/Retirement Department
[Institution Address]
[City, State, Zip Code]

Subject: Direct Rollover and Account Liquidation

Dear Customer Service Team,

Please accept this letter as formal authorization to liquidate and close my Traditional Individual Retirement Account (IRA) held with your institution.

Current Account Information:

Account Type: Traditional IRA
Account Number: [Your Account Number]

I am requesting a **Direct Rollover** of the entire balance of this account. Please do not withhold any taxes from this distribution, as these funds will be deposited into another qualified retirement plan.

Payment Instructions:

Please issue a check made payable to the successor custodian for my benefit (FBO) as follows:

Payable to: [New Institution Name] FBO [Your Name]
Account Number (at New Institution): [New Account Number]
Mailing Address for Check: [New Institution Address, City, State, Zip]

Please close the account once the full balance has been transferred and provide a final statement for my records. If there are any fees associated with this closure, please deduct them from the account balance prior to the rollover.

If you require any further information, please contact me at [Your Phone Number].

Sincerely,

[Your Signature]
[Your Printed Name]