

Savings Banks Employees Retirement Association Employer Stock Transfer Form

Employee Name:	SBERA Certificate No.
Employer Name:	SBERA Plan No.
Social Security Number:	Date of Birth:

Choose One of the following options and indicate the appropriate percentage

A. **Directions to TRANSFER FROM the Employer Stock Account**
Indicate the whole percentage to be transferred out of the Employer Stock Account _____ %
Indicate by whole percentage the amount to be transferred into the following accounts.
Total in this section must equal 100%.

_____ % Money Market Account	_____ % International Equity Account	_____ % LifePath 2010 Account
_____ % Equity Account	_____ % Large Cap Value Account	_____ % LifePath 2020 Account
_____ % Bond Account	_____ % Small Cap Value Account	_____ % LifePath 2030 Account
_____ % Index 500 Account	_____ % Large Cap Growth Account	_____ % LifePath 2040 Account
_____ % Small Cap Growth Account	_____ % LifePath Retirement Account	_____ % SBERA Account
_____ % All Asset Account		

B. **Directions to TRANSFER TO the Employer Stock Account**
Indicate the whole percentage to be transferred from one or more of the following accounts into the Employer Stock Account.

_____ % Money Market Account	_____ % International Equity Account	_____ % LifePath 2010 Account
_____ % Equity Account	_____ % Large Cap Value Account	_____ % LifePath 2020 Account
_____ % Bond Account	_____ % Large Cap Growth Account	_____ % LifePath 2030 Account
_____ % Index 500 Account	_____ % Small Cap Value Account	_____ % LifePath 2040 Account
_____ % Small Cap Growth Account	_____ % LifePath Retirement Account	_____ % SBERA Account
_____ % All Asset Account		

Participant Signature: _____ Date: _____

Plan Representative's Signature: _____ Date: _____