

LEBENTHAL LISANTI SMALL CAP GROWTH FUND

IRA Asset Transfer Form

1. INSTRUCTIONS

This form is used to transfer an existing IRA to your Lebenthal Lisanti Small Cap Growth Fund IRA.

- If a new account is being opened, complete this IRA Asset Transfer Form and an Individual Retirement Account Application.
- Include a statement from your existing IRA with this form.
- If you are transferring a passbook/certificate type account or an insurance type IRA, you must submit the passbook, certificate or insurance policy with this form.
- **The current custodian or trustee holding your IRA may require a "Signature Guarantee" or have other requirements. Please determine the requirements of your current custodian or trustee to avoid delays in processing your transfer.**
- Mail this completed form (along with your Individual Retirement Account Application, if opening a new account) to:

Lebenthal Lisanti Small Cap Growth Fund
P.O. Box 588
Portland, ME 04112

or Overnight Delivery to:

Lebenthal Lisanti Small Cap Growth Fund
c/o Atlantic Fund Services
Three Canal Plaza, Ground Floor
Portland, ME 04101

Contact us toll-free at: (800) 441-7031

2. YOUR LEBENTHAL LISANTI SMALL CAP GROWTH FUND IRA

Your Name		Your Account Number (unless new account)	Social Security Number
Your Mailing Address			
City	State	Zip Code	E-mail
Birth Date	Telephone (Day)		Telephone (Evening)

3. ACCOUNT BEING TRANSFERRED

Name of the Institution Currently Holding Your IRA (Shareholder Servicing Agent/Transfer Agent if mutual fund)			
Your Custodian's Mailing Address			
City	State	Zip Code	Customer Service Telephone Number
Account Number	Account Executive (if any)		

4. TRANSFER INSTRUCTIONS

Mutual Fund Company Transfer

Name of Fund _____

Select One: Liquidate All Shares

Liquidate \$ _____

Name of Fund _____

Select One: Liquidate All Shares

Liquidate \$ _____

Securities Transfer

Security Name _____

Select One: Liquidate All Shares

Liquidate \$ _____

Security Name _____

Select One: Liquidate All Shares

Liquidate \$ _____

Certificate of Deposit Transfer

- Transfer the proceeds of my CD, which matures on _____, upon maturity
Date (MM/DD/YYYY)
- Transfer the proceeds of my CD immediately

Note: If you are transferring a CD, and you wish to transfer your CD at maturity, please check the "Upon Maturity" box above and send this form at least two weeks prior to maturity. There may be a premature withdrawal penalty if you choose to liquidate a CD prior to maturity.

5. SIGNATURE AND AUTHORIZATION

I hereby agree to the terms and conditions set forth in this IRA Asset Transfer Form, and acknowledge establishing an IRA in the Lebenthal Lisanti Small Cap Growth Fund through my execution of an Lebenthal Lisanti Small Cap Growth Fund IRA Application.

Please Note: The custodian or trustee holding your current IRA may require a "Signature Guarantee" prior to releasing your assets. To avoid processing delays, please check with your custodian to determine if a "Signature Guarantee" is required.

Your Signature

Date (MM/DD/YYYY)

Signature Guarantee (if required by your current custodian)

Fed Wire Asset Transfer: By checking this box, I authorize my IRA asset transfer(s) to be transferred via Fed Wire. I understand that my resigning trustee/custodian may charge a wire fee for this service.

DO NOT COMPLETE THE SECTION BELOW

INSTRUCTIONS TO RESIGNING TRUSTEE/CUSTODIAN

Type of IRA: TRADITIONAL SEP-IRA ROTH QUALIFIED PLAN ROLLOVER BENEFICIARY IRA

Please forward a check made payable to the **Lebenthal Lisanti Small Cap Growth Fund, FBO** _____

Please include the following reference number on the check _____

Please forward the check or draft and any accompanying documents to:

Regular Mail

**Lebenthal Lisanti Small Cap Growth Fund
P.O. Box 588
Portland, ME 04112**

Overnight Delivery

**Lebenthal Lisanti Small Cap Growth Fund
c/o Atlantic Fund Services
Three Canal Plaza, Ground Floor
Portland, ME 04101**

Wire Delivery

**The Huntington National Bank
Westerville, OH
Atlantic Shareholder Services, LLC FBO
Forum Funds
ABA 044000024
Account # 01892542416
Lebenthal Lisanti Small Cap Growth Fund
(Fund Account Number)**

Contact us toll-free at: (800) 441-7031

INSTRUCTIONS FROM ACCEPTING CUSTODIAN

The Custodian hereby accepts its appointment as IRA Custodian, agrees to accept the transfer described above and, upon receipt, will apply the proceeds to the Lebenthal Lisanti Small Cap Growth Fund IRA established on behalf of the individual named herein.

Authorized Signature (On behalf of the Lebenthal Lisanti Small Cap Growth Fund)

Date (MM/DD/YYYY)