



Pyramid
The Pyramid Companies

MINIMUM DISTRIBUTION IRA REQUEST

Date: _____

To: _____

RE: Account Number _____

Mutual Fund Name _____

Client's Name _____

Dear Representative:

I request that all funds available or \$ _____ or _____ % of the funds be liquidated and forward to the address of record.

There is to be _____% withheld for taxes from this liquidation and I will net the difference. This is part of my required minimum distribution for 2000, therefore, no CDSC should be applied.

If there are any questions with this request, please contact Pyramid Funds Corporation, my broker/dealer, at 518-459-1671. Thank you.

By x _____
Owner's Signature