

Individual Retirement Account

(Traditional, Roth, Rollover or SEP IRA)

Delaware Charter

Guarantee & Trust Company

P. O. Box 8963 / WILMINGTON, DE 19899-8963 / 302-995-2131 / 800-209-9010

PRIVACY NOTICE

This Privacy Notice is provided on behalf of Trustarsm Retirement Services, a trade name of Delaware Charter Guarantee & Trust Company. It describes our practices for safeguarding personal information about the individuals, including IRA holders, who own or apply for our financial products or services primarily for personal, family, or household purposes.

If you are a plan sponsor, this Privacy Notice describes our practices for safeguarding personal information about your employee benefit plan participants and beneficiaries. It does not apply to you as the plan sponsor.

PROTECTING YOUR PRIVACY

We take great care to properly handle information about IRA holders and employee benefit plan participants and beneficiaries, hereafter "you." This Notice describes how we handle personal information and our commitment to protecting your privacy.

WE SAFEGUARD THE INFORMATION WE COLLECT ABOUT YOU

We follow strict security standards and procedures to help prevent unauthorized access to personal information. Only properly authorized employees may access information we collect from or about you. We regularly test our technology and employ multiple procedures to protect the confidentiality of information about you. We apply rigorous standards for protecting personal information to all our interactions with you, including those conducted via the Internet.

HOW WE COLLECT INFORMATION

We may collect information about you from the following sources:

Information we obtain during the application or enrollment process. You may provide information as part of the application or enrollment process, such as your name, address, Social Security number, and employment data.

Information we obtain from third parties. This type of information may include such things as market value data about your account and similar information.

Information about transactions and experience. We create and retain information based on your transactions and experience with us, such as investment records and account balances.

Information we obtain through Internet technology. This includes information you may provide via on-line forms you complete and information we receive when you visit our website.

HOW WE SHARE INFORMATION WITH THIRD PARTIES

We may disclose the information we collect about you, former customers, plan participants, and beneficiaries in response to a subpoena, to prevent fraud, to comply with an inquiry by a government agency or other regulator, or as necessary for other legal purposes.

We also may disclose information we collect about you, former customers, plan participants, and beneficiaries as follows:

- to third party service providers that perform services for us in the processing or servicing of your transaction, or third parties that perform services on our behalf; and
- to third parties with your consent or at your direction or otherwise as permitted by law.

ACCURACY OF INFORMATION

We strive to keep our records accurate and will make appropriate corrections when you notify us. Please let us know if there is incorrect information in any statements or other communications that you receive from us.

ADDITIONAL INFORMATION

If you have questions about our Privacy Notice, please write to our Privacy Officer at PO Box 8963, Wilmington, Delaware 19899-8963.

The term "third party" refers to any entity that is not an affiliate of Trustarsm Retirement Services.

Receipt of this Notice does not constitute our acceptance of an application for any product or service.

We may modify our privacy practices occasionally. If we do so, we will communicate any material changes to you as required by law.

If a state's privacy requirements are more restrictive than those stated in this Notice, we will meet all applicable state requirements.

Your agent, investment executive, consultant, or others with whom you have a relationship may have a different privacy policy.

Application for Traditional, Roth, Rollover, & SEP IRA

CHECK ONE: <input type="checkbox"/> New	<input type="checkbox"/> Transfer	CHECK ONE: <input type="checkbox"/> Traditional	<input type="checkbox"/> Roth	<input type="checkbox"/> Rollover	<input type="checkbox"/> SEP
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FOR ROTH ACCOUNTS ONLY CHECK ALL BOXES THAT APPLY: <input type="checkbox"/> New <input type="checkbox"/> Partial <input type="checkbox"/> Total Conversion Amount \$ _____	DCG&T USE ONLY
Conversion from my existing Delaware Charter IRA# _____ to a Roth IRA	G&T# _____ PLAN# _____
Conversion from my existing account at _____ to a Roth IRA	SS# _____ CODE# _____

DEPOSITOR INFORMATION			
NAME _____			
ADDRESS _____			
CITY _____	STATE _____	ZIP _____	PHONE _____

DATE OF BIRTH _____	SOCIAL SECURITY NUMBER _____
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PRIMARY BENEFICIARY INFORMATION (If more than one Primary beneficiary is listed, make sure percentage is noted.)			
1 NAME _____	PERCENTAGE _____	RELATIONSHIP _____	
DATE OF BIRTH _____	SOCIAL SECURITY NUMBER _____		
2 NAME _____	PERCENTAGE _____	RELATIONSHIP _____	
DATE OF BIRTH _____	SOCIAL SECURITY NUMBER _____		

CONTINGENT BENEFICIARY INFORMATION (Replaces Primary noted above if Primary predeceases the Contingent)			
1 NAME _____	PERCENTAGE _____	RELATIONSHIP _____	
DATE OF BIRTH _____	SOCIAL SECURITY NUMBER _____		
2 NAME _____	PERCENTAGE _____	RELATIONSHIP _____	
DATE OF BIRTH _____	SOCIAL SECURITY NUMBER _____		

Note: Community and marital property state laws may require your spouse to be named as at least a 50% primary beneficiary. Check with your legal adviser if you are impacted by these state laws.

PARTICIPANT ACKNOWLEDGEMENT	
I/We appoint Delaware Charter to serve as Trustee. By making this appointment I/We agree to and acknowledge the following: I/We have read and understand the Trust Agreement, Disclosure Statement, and Schedule of Trustee Fees and agree to abide by the terms of the plan documents listed above. I/We agree to pay all applicable fees described in the Schedule of Trustee Fees, which may be changed from time to time. Any fee changes will be communicated to me in writing by Delaware Charter. If I/We do not pay such Trustee fees directly, I/We authorize my/our investment executive as "custodian" to debit such Trustee fees from my retirement plan account. I/We understand Delaware Charter is not an investment adviser and does not supervise or control my/our investment executive. Delaware Charter does not endorse any particular investment. I/We agree to use independent judgment in making my/our investment decisions. I/We agree to resolve disputes with Delaware Charter through binding arbitration. See Article XII of the Trust Agreement. I/We certify that the above social security numbers(s) are true and correct.	
APPLICANT'S SIGNATURE _____	DATE _____

TO BE COMPLETED BY INVESTMENT EXECUTIVE			
INVESTMENT EXECUTIVE NAME AND FIRM _____			CLIENT'S ACCOUNT NUMBER _____
ADDRESS _____			
CITY _____	STATE _____	ZIP _____	PHONE _____

APPROVAL OF TRUSTEE
The foregoing Application is hereby approved by the Trustee this _____ day of _____, 20____
Attest _____ by _____

Please send the original to Mesirow Financial, Inc., Attn: New Accounts, 350 North Clark Street, Chicago, Illinois 60610.
Please retain a copy for your records.