

Please complete and return this form.



Mailing Address:
P.O. Box 9351
Des Moines, IA 50306-9351

Principal Bank

Plan Term IRA or Safe Harbor IRA Signature Card

Section 1 – Account Owner Information

As the Account Owner, I acknowledge that I am responsible for the accuracy of the information contained on this signature card. By signing and returning this IRA Signature Card to Principal Bank I am confirming the accuracy of this information. If I fail to complete, sign and return this signature card and provide the Custodian, Principal Bank, with accurate information, the payment of the IRA proceeds to me may be delayed or, if the Custodian is unable to locate me, may be forfeited under state property laws. The information provided on this form will be used to update your records.

Name of Account Owner (first, middle, last)		Account Number	
Street Address (required)		Email Address (used by Principal only)	
City	State	ZIP Code	
Mailing Address (optional)			
City	State	ZIP Code	
Birthdate (MM/DD/YYYY)	Home Phone Number	Driver's License or Photo ID Number	State Issued

Federal Tax ID number or Social Security Number

required

Please check the box below if it applies to you.

Nonresident Alien: I am neither a citizen nor a resident of the United States.

Section 2 – Disclosure Information

Compensation Disclosure: I understand that Principal Bank or other companies with which it is affiliated may pay compensation, directly or indirectly, to various intermediaries or selling professionals for the sale or referral of Principal Bank products.

Documents: I confirm that I have read the following documents and that I have retained a copy of each as a legally binding record of my rights and obligations under my Principal Bank IRA. I agree to the terms and conditions stated on these documents and acknowledge receipt of a completed copy of each on today's date.

- Traditional or Roth IRA Custodial Booklet
- Principal Bank Terms & Conditions and Required Disclosures
- Principal Bank Schedule of Fees
- Privacy Notice

Section 3 – Account Owner Information

By signing this document, I confirm the accuracy of my information provided.

Signature of Account Owner X	Date (MM/DD/YYYY)
Signature of Custodian (Principal Bank Representative) X	Date (MM/DD/YYYY)

Note: Beneficiary information does not carry over from a 401(k) plan. If you would like to add a beneficiary, please complete an IRA Designation of Beneficiary form.

For Terms and Conditions and other account agreements, please go to www.principalbank.com. In the left navigation, select the Customer Service link, and then Account Disclosures.