

**Helpline:** If you need assistance please call Sentinel Investor Services at **800-282-FUND (3863)**.

Use this form to establish a Sentinel Fund Mandatory IRA Rollover Account. This form used for plan sponsor initiated mandatory rollover from Employer Sponsored Plan to Individual Retirement Account.

**Please make checks payable to:** Sentinel Funds

**Mail completed application form to:** Sentinel Investments  
PO Box 55929  
Boston, MA 02205-5929

### 1. Registration

\_\_\_\_\_  
Plan Participant (Employee) Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

### 2. Transferring Plan Information

\_\_\_\_\_  
Transferring Plan Name

\_\_\_\_\_  
Transferring Plan Contact

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

### 3. Investment Instructions

*Minimum investment:*  
\$1,000

An IRA Custodial Account will be established in Class A shares of the Sentinel Low Duration Bond Fund with all dividends reinvested in additional shares. The Prospectus contains important information about a Fund, including a Fund's investment objectives, risks, charges and expenses that an investor should carefully consider before investing. To obtain a Prospectus on any Sentinel Fund, please contact your Investment Professional or Sentinel Investor Services at 800-282-FUND (3863) or visit [www.sentinelinvestments.com](http://www.sentinelinvestments.com). Read the Prospectus carefully before investing.

#### Retirement Plan Investments in the Sentinel Funds

- You are instructed to transfer the participant's total account balance from the retirement plan named in section 2.  
(Signature of Plan Trustee is required if this option is selected.)

#### All other retirement plans

- Enclosed is a check, payable to Sentinel Funds in the amount of \$ \_\_\_\_\_.

#### 4. Certifications

The undersigned trustee or administrator of the above-named plan instructs Boston Financial Data Services, Inc. (BFDS) to process an automatic rollover for the above-named participant. I/We certify that the participant was properly notified of his/her distribution rights under the plan and that Social Security number shown in section 1 of this Application is the participant's correct Social Security number to the best of my/our knowledge.

**A. Rollover of plan distribution.** Plan Administrator/Trustee, by a direct rollover from the Plan, will distribute to BFDS the interest of the Participant in the Plan under the automatic rollover provisions of section 401(a)(31)(B) of the Internal Revenue Code.

**B. Establishment of IRA.** BFDS will establish with UMB Bank, n.a. ("Custodian") a rollover individual retirement account ("IRA"), subject to the provisions contained in IRS Form 5305-A, to hold such amounts in the name of Participant.

**C. Investment of funds.** BFDS will invest the rollover IRA in the Sentinel Low Duration Bond Fund, which seeks high current income and limited fluctuations in principal value. Custodian certifies that the Sentinel Low Duration Bond Fund meets the requirements of 29 C.F.R. § 2550.404a-2(c)(3)(i), (ii) and (iii).

**D. Comparable fees and expenses.** All fees and expenses with respect to the IRA (e.g., maintenance fees, investment expenses, termination costs and surrender charges) shall not exceed the fees and expenses BFDS or Custodian charges for comparable IRAs established for reasons other than the receipt of an automatic rollover distribution.

**E. Enforceability by Participant.** Participant shall have the right to enforce the terms of this Agreement against BFDS with regard to the account balance that is the subject of this Agreement.

**By signing below, I confirm that the information I have provided to the Fund is true and correct.**

\_\_\_\_\_  
Signature of Plan Administrator or Trustee

\_\_\_\_\_  
Date

Custodian Acceptance: BFDS, as agent for UMB Bank, n.a., will accept appointment as Custodian of the participant's account. However, this Agreement is not binding upon the Custodian until the participant has been sent a statement of the transaction. Notifying the participant of a purchase of the Sentinel Low Duration Bond Fund will also serve as notification of UMB Bank's acceptance of appointment as Custodian of the participant's account.

**UMB Bank, n.a., Custodian**

#### 5. Dealer Information

\_\_\_\_\_  
Representative Name

\_\_\_\_\_  
Dealer's Registered Name

\_\_\_\_\_  
Number

\_\_\_\_\_  
Branch Address (Street, City, State, Zip Code)

\_\_\_\_\_  
Branch Number

\_\_\_\_\_  
Dealer's Authorized Signature

\_\_\_\_\_  
Representative's Phone Number