

COVERDELL ESA TRANSFER REQUEST FORM

Use this Coverdell ESA Transfer Request Form to move ESA assets from one Coverdell ESA to another. You will need to complete a New Account Agreement if you do not already have an account established. If you have any questions regarding this form, please call Shareholder Services at 888-462-5386.

PART I: INVESTOR INFORMATION (RECEIVING ESA) (*DENOTES REQUIRED INFORMATION)

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Minor's Name* (First, M.I., Last)	Date of Birth*	Social Sec	curity Number*
Responsible Individual's Name* (First, M.I., Last)	Date of Birth*	Social Sec	curity Number*
Responsible Individual's Street Address (Physical Address)*A	pt# City*	State*	Zip Code*
Mailing Address (if different from above)	City	State	Zip Code
Daytime Phone* Evening Phone			
PART II: CURRENT COVERDELL ESA TRUSTEE, (PLEASE ATTACH A RECENT STATEMENT) Name of Current ESA Trustee/Custodian/Issuer*	Current ESA Accour		_
P. O. Box* Suite #	City*	- State*	Zip Code*
			Zip Code
Name of Contact*	Contact's Phone Nur	nber*	

PAR'	PART III: TRANSFER INSTRUCTIONS			
	This is a new account; a completed New Account Agreement is attached.			
	The proceeds of this transfer will purchase shares into my existing account as listed below.			
A	Account Number			

Transfer Allocation

List the percentage that will be transferred using whole percentages, the total must add up to 100%.

Name of Investment	Ticker	Investment Amount
White Oak Select Growth Fund	WOGSX	%
Pin Oak Equity Fund	POGSX	%
Rock Oak Core Growth Fund	RCKSX	%
River Oak Discovery Fund	RIVSX	%
Red Oak Technology Select Fund	ROGSX	%
Black Oak Emerging Technology Fund	BOGSX	%
Live Oak Health Sciences Fund	LOGSX	%
Total		100 %

PART IV: LIQUIDATION 1	INSTRUCTIONS	
I authorize and direct the curren	t ESA Trustee, Custodian or Issuer to liquidate ass	ets as follows (select one).
☐☐ Immediately liquidate all	assets and send the cash proceeds to the new ESA	Trustee/Custodian identified below.
	of the current ESA and send the pridual: Attach additional written liquidation instruc	roceeds to the new ESA Trustee/Custodian identified below. (Note ctions, if necessary.)
☐☐ Other (describe):		
Please send proceeds by check.		
Make check payable as follows:	Oak Associates Funds: FBO (Investor's Name	e and Account Number)
Please mail check to:	Regular Mail Delivery Oak Associates Funds P.O. Box 46707	Overnight Delivery Oak Associates Funds 225 Pictoria Drive, Suite 450

Cincinnati, OH 45246

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Cincinnati, OH 45246-0707

PART V: ACKNOWLEDGEMENT

By signing this *Coverdell ESA Transfer Request Form*, I certify that I am the Responsible Individual, the information provided is true, correct and complete, and the Trustee/Custodian may rely on what I have provided. I understand that I am responsible for ensuring I am eligible to authorize this transfer and I assume all responsibilities for any consequences as a result of my actions. I have been advised to seek competent legal and tax advice and have not been provided any such advice from the Trustee/Custodian. I will indemnify and hold the Trustee/Custodian (U.S. Bank N.A.) harmless from any consequences related to executing my directions. The Trustee/Custodian agrees to accept this transfer as instructed above.

Signature of R	esponsible Individual: X	Date:	

PART VI: NEW TECHNOLOGY MEDALLION SIGNATURE GUARANTEE STAMP

A New Technology Medallion Signature Guarantee Stamp is designed to protect the account from fraud (if required by your current custodian).

The following institutions are acceptable signature guarantors:

- Participants in good standing of the Securities Transfer Agents Medallion Program ("STAMP")
- Commercial banks which are members of the Federal Deposit Insurance Corporation ("FDIC")
- Trust Companies
- Firms which are members of a domestic stock exchange
- Eligible guarantor institutions qualifying under Rule 17Ad-15 of the Securities Exchange Act of 1934, as amended, that are authorized by charger to provide new technology medallion signature guarantee stamps (e.g., credit unions, securities dealers and brokers, clearing agencies and national securities exchanges
- Foreign branches of any of the above

*Note: The Transfer Agent cannot honor guarantees from notaries public, savings and loan associations, or saving banks.

NEW TECHNOLOGY MEDALLION SIGNATURE GUARANTEE STAMP

P	ADT VII. I	ETTED OF	ACCEPTANCE	(TO BE COMDI	ETED BY NEW	CUSTODIAN)
г	AKI VII: I	JELLEK CJE	ACCEPTANCE	CIO BE COMPI	JELIELD KY NEW	CUSTODIAN

By signing below, the Trustee/Custodian of the receiving ESA agrees to accept this transfer as instructed above.

Signature of Receiving ESA Trustee/Custodian Representative: X	Date:

MAILING INSTRUCTIONS

Please send completed form to: Regular Mail Delivery

Oak Associates Funds
P.O. Box 46707
Cincinnati, OH 45246-0707

Overnight Delivery
Oak Associates Funds
225 Pictoria Drive, Suite 450
Cincinnati, OH 45246