

Sub Firm #	BR Code	FA Code	Account Number
001	9N25	25	-

Please transfer the following cash and/or securities FROM:

Purpose of transfer—required for UTMA/UGMA, IRA and QRP accts.

Full Name or Account Title
Fred F. Alexander & Grace J. Alexander

Securities to Transfer:		
No. of Shares	Security Description	Symbol or Cusip Number
100%	AT&T a/c 102980654	T
<input type="checkbox"/> ALL	ALL SECURITIES HELD IN ABOVE BROKERAGE ACCOUNT	

Cash and/or Money Market to Transfer.

Enter the dollar amount of cash/or money market to be transferred. \$

Transfer ALL cash and money market.

Type of Transfer. Select ONE option and provide the requested information. (IRA's eligible for first option only—for other options IRA Distribution Form must be used.)

<input type="checkbox"/>	Deposit or Journal to WS Brokerage Account. If Assets are being "rolled over" into an IRA, the Rollover Certification form must be attached.	Account Number	<input type="text"/> - <input type="text"/>
<input checked="" type="checkbox"/>	Deliver Shares to Another Brokerage Firm.	Account Number	1067-5776
	Account Title Linda Alexander & Dennis Gubbels	Firm Name	Wachovia Securities
		DTC #	0141
<input type="checkbox"/>	Issue a Physical Certificate.	Name	<input type="text"/>
	Registrant's Address	Registrant's SSN or Tax ID	
	City	State	Zip
	Address (if different from Registrant's address)		
	City	State	Zip
<input type="checkbox"/>	Mail Check.	Payable to:	<input type="text"/>
	Street Address		
	City	State	Zip
<input type="checkbox"/>	Wire Federal Funds.	Bank Name:	<input type="text"/>
	Bank Location, City	State	Country
	Further Credit (if applicable)	Bank ABA#	Bank Account No.
	Account Title	Bank Contact	Phone (Include Area Code)
	Special Instructions		

Please read the Terms and Conditions on the back of this document carefully. Do not sign this document unless it is complete and you understand its terms. (All account owners must sign. If assets are coming from QRP, Plan Trustee(s) must sign.)

Signature 1 <i>Andrew D. Alexander</i>	Name Andrew Alexander, Personal Rep.	Date 10 / 27 / 2003
Signature 2	Name	Date
Signature 3	Name	Date
Financial Advisor's Signature	Branch Manager's Signature	

Distribution Instructions: 1) Operations Copy (Forward to respective Operations Section below) 2) Branch Copy—Retain in Branch File 3) Credit Copy—Retained by Client
 Credit—Journal Entry (non-IRA accounts) IRA—Journal to FCC IRA (attach Rollover Certification if rollover) Vault—(a) Non-Negotiable (b) Re-Registration Transfer—Special Registration

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