



# CamaPlan

Personalized Self Directed IRA Planning

## Deposit Coupon Instructions

### WHEN TO USE

Please use this form any time funds are to be posted to your account; for example:

- Contributions
- Rollovers
- Sale proceeds
- Loan payments
- Rental payments

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### INSTRUCTIONS

Please complete the deposit coupon and send along with check or money order.

\*Note: If CAMA is receiving an incoming wire or ACH please fax/email the deposit coupon prior to sending funds

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### HOW TO FILL OUT THE FORM

#### 1. General Information

**Participant Name:** Client's Name

**Account Number:** Client's CAMA Account Number

#### 2. Deposit Details

Deposit Frequency – Select "Once", "Monthly" or "Quarterly".

Method of Deposit - Select "Check", "Wire" or "ACH", indicating the method in which CAMA will receive the deposit.

**Reason for Deposit:** Please check appropriate box. If "Other" is selected, use the special instructions box to describe the deposit.

**Special Instructions box:** If the payment is income on an asset in your account, please describe the asset (e.g.: "123 Cherry Street" or "ABCNote").

#### 3. Signature of Depositor

Sign and Date the form and mail to:

CAMA Self Directed IRA, LLC

5 Valley Square, Ste. 103

512 E. Township Line Road

Blue Bell, PA 19422

Or email to [operations@camaplan.com](mailto:operations@camaplan.com)

Or fax to 973-302-8622



**DEPOSIT COUPON**

**1. GENERAL INFORMATION**

Participant Name:

Account Number:

**2. DEPOSIT DETAILS**

Deposit Frequency  Once  Monthly  Quarterly

Method of Deposit  Check  Wire  ACH

Make check payable to CAMA SDIRA ,LLC FBO (Account Holder Name) IRA \_\_\_\_\_ For Wire & ACH memo with Account # /Asset Name

**REASON FOR DEPOSIT:**

Rental Income for:  Amount:

Loan Payment for:  Interest:  Principal:

Current Yr. Contribution: Amount

Previous Yr. Contribution: Amount

Rollover: Amount  Please Include Rollover Form

Other Income for:  Amount:

**SPECIAL INSTRUCTIONS:**

**3. SIGNATURE OF DEPOSITOR**

I hereby certify and acknowledge that it is my responsibility to correctly characterize the nature and purpose of the deposit being made hereunder. I understand that CAMA Self-Directed IRA, LLC (Administrator) does not provide legal, tax or investment advice and that it is incumbent upon me to obtain pertinent advice and counsel from qualified third party professionals with respect to the subject matter hereof. I hereby agree to release, indemnify and hold Administrator and Custodian harmless from any and all liability that may arise as a consequence of Administrator processing this deposit as set forth herein.

DEPOSITORS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_