



This form must be used to authorize the purchase of any investment. Please read the attached instruction sheet on how to complete this form and what documents you will need to submit with this form.

IMPORTANT: Asset documents must specify the following registration: "IRA Services Trust Company CFBO: [Investor Name] [IRA Account No.] (Tax ID: 26-2627205)"

1. PERSONAL INFORMATION (*required field)

Should IRA Services need to contact you in regards to this request, your preferred method of contact is:

Email

Primary Phone

First Name*	Middle Name	Last Name*
Account Number*	Social Security Number* (last 4 digits)	Date of Birth* (MM/DD/YYYY)
Phone* XXX-XXX-XXXX	Email (Your personal email only)	

2. INVESTMENT INSTRUCTIONS (Prior to releasing your funds we may contact you for verbal confirmation of these instructions.)

Expedited Service: Check this box if you want this request to be expedited. Please read the attached instruction sheet for information regarding this service. By checking this box you agree to the fees and terms of this expedite service.

Change Request: Check this box if this request is a modification of an original request.

Asset Name*
Asset Type*

(e.g. brokerage account, certificate of deposit (CD), hedge fund, IRA LLC, life settlement, LLC/LP, managed futures/foreign currency account, precious metals, private placement, private stock, promissory note (secured or unsecured), publicly-traded security (stock, bond, mutual fund), real property, REIT, tax lien, structured settlement, etc.)

Contact Information (all fields must be completed unless otherwise specified)

Name of Investment Sponsor/Managing Entity*		Address*
Phone* XXX-XXX-XXXX	Fax Number (optional)	Email*

Amount to Purchase (select one)

Please note we will retain enough cash to maintain your minimum required balance, and to cover any investment-related fees or any unpaid fees before sending your requested amount. If there are insufficient funds to cover the minimum balance and/or fees, your request will be put on hold until sufficient funds are available.

Invest exactly: _____
Invest all available cash balance less funds on hold, required minimum balance, fees due and transaction fees Optional: Specify amount of cash required in custodial cash account before purchase is made: _____ Optional: If you wish to retain more than the minimum required balance, specify amount to be retained: _____
Total shares/units/interest to purchase: _____
Invest exactly: _____ Total shares/units/interest to purchase: _____

When to Purchase (select one)

Purchase one-time only as soon as possible (default)

Purchase one-time only on or after (MM/DD/YYYY): _____

3. DOCUMENT REQUIREMENTS (Your request will not be processed if you do not provide the required documents with this form.)

Please refer to the attached *INVESTMENT DOCUMENT REQUIREMENTS* document. There may be several documents required to complete your investment transaction. Your investment request must contain all of the required documentation in order to be processed. Please make sure that all supporting documents are completed in full and submitted at the same time with this form. If this is a subsequent investment in an asset that is already held in your account, you may be required to submit supporting documents. *ASSETS MUST BE REGISTERED AS "IRA SERVICES TRUST COMPANY CFBO [INVESTOR NAME] [ACCOUNT NO.] (TAX ID: 26-2627205)".*

4. FUNDING INSTRUCTIONS (Please indicate how funds from your account are to be sent (check or wire) for the purchase of the asset listed above.)

Send a WIRE. I have completed and attached a *WIRE REQUEST* form. I understand that an outgoing wire fee applies.

Send a CHECK using the following service:

Regular Mail

Overnight Mail (via FedEx) (overnight delivery fee + cost applies)

Charge cost of overnight delivery to:

FedEx Account #: _____

If no account # is provided, it will be charged to your IRA account

Payee Name & Address (must not be a bank address*)

Payee Name

Address

City/State/Zip

**We no longer mail checks to bank addresses.*

5. ACKNOWLEDGMENT, AUTHORIZATION & PARTICIPANT SIGNATURE

I hereby acknowledge that I am solely responsible for the investment instructions I am making. You acknowledge that IRA Services, Inc. and IRA Services Trust Company and their representatives do not provide tax, legal or investment advice; that the Account is self-directed; and that you assume full responsibility for this investment. IRA Services, Inc. and IRA Services Trust Company are not responsible for and do not guarantee the products, services or performance of any self-directed investment. You release and agree to indemnify and hold harmless IRA Services, Inc. and IRA Services Trust Company, their divisions, officers, employees, directors, representatives, owners, affiliates, successors, and assigns from liability for any adverse consequences that may result from this investment. I hold harmless, protect and indemnify the Custodian and Administrator from and against any and all liabilities, losses, damages, expenses and charges that the Custodian and Administrator may sustain or might sustain resulting directly or indirectly from my investment. By your signature below, you certify that the information and instructions provided, and the elections made by and through this investment instructions, are true and correct. I acknowledge that if I do not provide a notarized signature, IRA Services Trust Company may contact me for verbal confirmation of my investment instructions, which may cause delays if I cannot be reached at the phone number provided in Section 1 of this form or any of my phone number(s) on record. I hereby authorize the purchase of the asset listed above for my IRA Services Trust Company account.

Account Owner's Signature

X

Date (MM/DD/YYYY)

Please sign and submit additional documents as required.

DELIVERY INSTRUCTIONS

Email
investments@IRAServices.com

Fax
(650) 745-2929

Regular mail
IRA Services
PO Box 7080
San Carlos, CA 94070-7080

Overnight mail
IRA Services
1160 Industrial Road, Unit 1
San Carlos, CA 94070-4128