

DEPOSIT COUPONS

ACCOUNT HOLDER NAME	FIRST/MI/LA	A <i>ST</i>		Contribution For Tax Year:
				SEP Contributions are reported in the year they are receieved.
ACCOUNT NUMBER	DEB	OSIT AMOUNT	CHECK NUMBER	Employee Contribution Employer Contribution
ACCOONT NOWBER	Ι.	OSIT ANIOUNT	CHECK NOWBER	If this deposit is for a SEP, SIMPLE, or 401(k) plan, please specify
	\$			above whether this is an "Employee" or "Employer" contribution.
EXPECTED WIRE TRANSFE	R DATE	INVESTMENT NAM	E	Rollover For Tax Year:
EMAIL ADDRESS			ASSET REFERENCE NUME	ER Payment Towards Note or Debt**
				Sale Proceeds – Sale Direction Required
**Plaasa nrovida a hroakdown o	of principal and	d interest nauments helou	ı if this is a payment towards a note or	Rental or Property Income Sale
debt instrument.	, principal and	interest payments below	i i, tiiis is a payment towards a note of	Repayment of Qualified Birth/Adoption Distribution
INTEREST	PRIN	ICIPAL	OTHER	
\$	\$		\$	Proceeds (partial sale) Other:
NEW ENDING BALANCE O		:/DFRT		6100 Indian School Rd. NE, Suite 215 Albuquerque, NM 87110
		., 5251		Toll Free: 1-800-529-3951 Fax: 505-792-6096
\$				Email: Help@IRASTC.com
ACCOUNT HOLDED MANAS	51DCT/841/1	A.C.T.		
ACCOUNT HOLDER NAME	riksi/MI/LA	I CF		Contribution For Tax Year:
				SEP Contributions are reported in the year they are receieved.
ACCOUNT NUMBER	DEP	OSIT AMOUNT	CHECK NUMBER	Employee Contribution Employer Contribution
	\$			If this deposit is for a SEP, SIMPLE, or 401(k) plan, please specify
EVECTED WIRE TO ANGE		LININ/ECTRAENIT NIANA		above whether this is an "Employee" or "Employer" contribution.
EXPECTED WIRE TRANSFE	RDAIE	INVESTMENT NAM	Ė	Rollover For Tax Year:
				FR Payment Towards Note or Debt**
EMAIL ADDRESS			ASSET REFERENCE NUME	5°° 11吕 '
				Sale Proceeds – Sale Direction Required
**Please provide a breakdown o debt instrument.	f principal and	d interest payments below	vif this is a payment towards a note or	
INTEREST	PRIN	ICIPAL	OTHER	Repayment of Qualified Birth/Adoption Distribution
\$	\$		\$	Proceeds (partial sale) Other:
				6100 Indian School Rd. NE, Suite 215 Albuquerque, NM 87110
NEW ENDING BALANCE ON THE NOTE/DEBT			Toll Free: 1-800-529-3951	
\$			Fax: 505-792-6096 Email: Help@IRASTC.com	
				Linaii. Help@itiASTC.com
ACCOUNT HOLDER NAME FIRST/MI/LAST				Contribution For Tax Year:
				SEP Contributions are reported in the year they are receieved.
ACCOUNT NUMBER	DEP	OSIT AMOUNT	CHECK NUMBER	Employee Contribution Employer Contribution
ACCOUNT HOWIDER		JULI AMOUNT	CHECK HOMBER	If this deposit is for a SEP, SIMPLE, or 401(k) plan, please specify
	\$			above whether this is an "Employee" or "Employer" contribution.
EXPECTED WIRE TRANSFE	R DATE	INVESTMENT NAM	E	Rollover For Tax Year:
EMAIL ADDRESS			ASSET REFERENCE NUME	ER Payment Towards Note or Debt**
				Sale Proceeds – Sale Direction Required
**Please provide a breakdown o	of principal and	d interest payments below	ı if this is a payment towards a note or	other Rental or Property Income Sale
debt instrument.	, ,		,	Repayment of Qualified Birth/Adoption Distribution
INTEREST	PRIN	ICIPAL	OTHER	
\$	\$		\$	Proceeds (partial sale) Other:
NEW ENDING BALANCE O		/DEBT	1.	6100 Indian School Rd. NE, Suite 215 Albuquerque, NM 87110 Toll Free: 1-800-529-3951
\$				Fax: 505-792-6096
T				Email: Help@IRASTC.com