

Deposit Coupon

This is a fillable PDF form. To complete the form, click in an area and type.

Account Owner Info					
Legal Name:		First, Mi	ddle, Last		
Vantage Account Number:		Deposit Amount: \$		unt: \$	
Deposit Type Please select	ct a deposit type				
O Check (Please allow five business days for checks to clear)		O Wire	ire O ACH (please provide transaction description in the notes sectio		n the notes section below)
Deposit Frequency <i>F</i>	Please select a deposit frequency	1			
🔿 One Time Deposit	me Deposit O Monthly		terly	O Semi-Annualy	() Annually
Deposit Details Please	provide the appropriate deposi	t details			
Contribution					
	O Previous Year:				
Rental Income					
Rental Property Address:					
City:		Sta	te:	Zip:	
Incoming Loan Payment		Loan Number:			
		Principal Amount:			
Other Income:					
Notes:					

Participant's Signature

Vantage Retirement Plans, L.L.C. ("Administrator") performs recordkeeping and administration duties in connection with Account Owner's self-directed retirement account (the "Account") on behalf of the custodian ("Custodian") as set forth in Account Owner's account application (the "Account Application"). The terms and conditions of this document are incorporated into the Account Application, and the terms and conditions of the Account Application are incorporated herein.

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 Administrator does not provide legal, tax, or investment advice and that it is my responsibility 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.

Account Owner's Signature: _

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