DEPOSIT FORM FOR CONTRIBUTIONS



DEPOSITS@IRACLUB.ORG P: 312-795-0988 F: 312-283-2615

ACCOUNT OWNER INFORMATION

FULL NAME	
LAST 4 OF S	SN
IRA CLUB A	CCOUNT NUMBER

2. CONTRIBUTION INFORMATION

IRA CLUB ACCOUNT NUMBER	ACCOUNT TYPE	AMOUNT	TAX YEAR
IRA CLUB ACCOUNT NUMBER	ACCOUNT TYPE	AMOUNT	TAX YEAR
IRA CLUB ACCOUNT NUMBER	ACCOUNT TYPE	AMOUNT	TAX YEAR
IRA CLUB ACCOUNT NUMBER	ACCOUNT TYPE	AMOUNT	TAX YEAR

3. SUBMISSION INFORMATION

□ VIA CHECK	☐ VIA WIRE TRANSFER	□ VIA ACH (PLAID)				
 CHARGE A CREDIT CARD TO MAKE AN ANNUAL CONTRIBUTION *3.5% Processing Fee Applies 						
CREDIT/DEBIT CARD NUMB	ER	EXPIRATION DATE	CW CODE			
NAME ON CREDIT CARD						

4. ACKNOWLEDGEMENT AND SIGNATURE

By signing this form, I authorize IRA Club to deposit the funds to my account(s) according to the information on this form. PLEASE NOTE: Federal laws determine contribution limits for IRAs, HSAs, & 401(k)s as stated in the Internal Revenue Code. Eligibility to contribute is dependent on tax filing status and adjusted gross income.

SIGNATURE	DATE SIGNED

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