

When to use this form:

Please use this form for purchases of **new** assets by your IRA / ESA / HSA Account. This form can be used to purchase any qualifying asset except precious metals.

Mail your Directive & Payment to:

CamaPlan
122 E. Butler Ave, Suite 100
Ambler, PA 19002

To complete your Directive:

1. COMPLETE AND SIGN THIS FORM

If you are purchasing Real Estate, Notes or Private Placements, fill in the appropriate section.

If your account does not have sufficient funds to make the purchase, please send funds by check, wire, or ACH along with a deposit coupon (available at CamaPlan.com) to CamaPlan. Please contact us for wire instructions.

2. MAIL THE FORM AND ANY CHECK OR MONEY ORDER TO COVER ALL TRANSACTION FEES TO CAMAPLAN

Refer to the Fee Schedule for a full explanation, or contact us with questions.

What's next?

You will be notified within 48 business hours of the following:

1. Your transaction paperwork is complete and the purchase will be completed within 48 hours
2. OR your paperwork is incomplete and what other documents or corrections are necessary

Operations@CamaPlan.com
(866) 559-4430

CamaPlan Fax:
(973) 302-8622

	Real Estate	Notes	Private Placement
Prior to Closing	<ul style="list-style-type: none"> • All purchase documents or sales agreement 	<ul style="list-style-type: none"> • Promissory note acknowledgement • Unsecured - Original Note • Secured - Original Note & Security paperwork 	<ul style="list-style-type: none"> • Operating Agreement • Subscription Agreement • Articles of Incorporation
After Closing	<ul style="list-style-type: none"> • Executed HUD1 closing • Original recorded deed • Hazard/Title insurance policies • All property tax bills and required payments • Payment Authorization Directive 	<ul style="list-style-type: none"> • Original signed note/ recorded mortgage/ assignments etc. • All payments and or payoffs 	<ul style="list-style-type: none"> • Original stock certificates, membership certificates or proof of ownership showing vesting • Amounts of any future capital contributions must come from the IRA account • Account owner may not advance funds on behalf of the account • At the end of each calendar year provide a fair market valuation of the investment

1. Participant Details

Legal Name

Account Number (if known)

2. Investment Information

Asset Description and Contact Information
(if applicable)

IRA Ownership Percentage (or price) of the Purchase

If applicable, indicate the IRA ownership percentage (0-100%) of this purchase and provide the total cost of the purchase.

(Note: IRA amount will be a prorated share based upon ownership percentage and total purchase price)

 %

Total Purchase Price

\$

Option A - Real Estate

Is there a deposit?

Yes No

Is the property to be mortgaged?

Yes No

Option B - Notes

This is a

New Note Existing Note

Is this a secured note?

Yes No

Interest rate %

Maturity Date

Option C - Private Placement

(or Structured Settlements)

Type of Private Placement

LLC Trust
 LP Corporation
 Structured Settlement

Other

No. of Shares

Price per share

\$

Ownership/Interest %

 %

Cost of Ownership/Interest

\$

3. Funding the Investment

How would you like CamaPlan to fund this investment from your account?

Method:

Check
 Wire
 ACH



Funding the investment (continued)

Send payment to:

Acct Name			
Street			
City			
State			
Zip			
ABA No.		ACH No.	
Acct No.			

6. Authorization

By signing below, I hereby acknowledge that I have reviewed the Asset Purchase Checklist for this investment, agree and understand the Asset Purchase Disclaimer & Indemnity on the following pages, and authorize this Asset Purchase Directive.

Authorizing Purchaser's Signature

Date

4. Transaction Fees

(Note: Please refer to the fee schedule on our website or contact customer service at 215-283-2868.)

Method:

- Your Account
- Check
- Credit Card

(Credit card transactions will be assessed a 3.5% service charge.)

Card Type:

- Visa
- American Express
- Discover
- MasterCard
- Other:

Card Number

Name on Card

Exp Date

CVC Code

DETACH AND KEEP FOR YOUR RECORDS

5. Asset Purchase Disclaimer & Indemnity Agreement

This Disclaimer and Indemnity Agreement will confirm our mutual understanding and agreement regarding the proposed investment by your Account in the above named entity. Your account is referred to in this document as the "Account", regardless of whether it is a retirement account under Internal Revenue Code (the "IRC") 401, 408 or 408A, a Coverdell Education Savings Account under IRC 530, or a Health Savings Account under IRC 223, you must sign this agreement and return it to us prior to making an investment.

1. I understand and confirm that I am directing CamaPlan LLC, to complete this transaction as specified above. I understand that my account with CamaPlan LLC is self-directed, and I take complete responsibility for any investment I choose for my account, including the investment specified in this Asset Purchase Directive. I understand and agree that the Custodian, the Administrator and/or the Record-keeper of my account does not sell or endorse any investment products, and that they are not affiliated in any way with any investment provider. I understand that the roles of the Custodian, the Administrator and/or the Record-keeper are limited, and their responsibilities do not include investment selection.
2. I understand that neither the Custodian, the Administrator and/or the Record-keeper has reviewed or will review the legitimacy, appropriateness or suitability of this investment, and I certify that I have done my own due diligence investigation prior to instructing the Administrator and/or Record-keeper to make this investment for my account. I understand that neither the Custodian, the Administrator and/or the Record-keeper determines whether this investment is acceptable under the Employee Retirement Income Securities Act (ERISA), the Internal Revenue Code (IRC), or any applicable federal, state, or local laws, including securities laws. I also understand the Custodian, the Administrator and/or the Record-keeper will not check with the Better Business Bureau or any other governmental or non-governmental agency to see if any complaints have been filed against the investment entity. I understand that it is my responsibility to review any investments to ensure compliance with these requirements.
3. I understand that my account is subject to the provisions of Internal Revenue Code (IRC) §4975, which

defines certain prohibited transactions and disqualified persons. I understand that if this investment is an entity and the Plan Asset Regulations issued by the U.S. Department of Labor apply, the entity is disregarded for purposes of the prohibited transaction rules of IRC §4975. I understand that I am responsible for confirming that no "disqualified person" with respect to my account will benefit from this investment in any way which is prohibited by IRC §4975. I acknowledge that neither the Custodian, the Administrator and/or Record-keeper has made or will make any determination as to whether this investment is prohibited. I certify that making this investment will not constitute a prohibited transaction and that it complies with all applicable federal, state, and local laws, regulations and requirements. I assume all responsibility and consequences if this investment becomes a prohibited transaction.

4. I understand that my account is subject to the provisions of IRC §§511-514 relating to Unrelated Business Taxable Income (UBTI) of tax-exempt organizations. I understand and agree that the Custodian, the Administrator and/or the Record-keeper has not provided tax advice regarding the subject of Unrelated Business Income Tax (UBIT) as a result of this investment. I understand that I will be responsible for preparing or having prepared the required IRS Form 990-T tax return and any other documents, including expenses of preparation and filing. I understand and agree that any UBIT owed must come from funds belonging to the Account. In addition all expenses associated with the preparation and filing will be paid by the Account.
5. All vestings to read: CAMA SDIRA, LLC FBO (client name) IRA or: CAMA SDIRA, LLC FBO Account # IRA. Contact information and correct mailing address for this investment should be listed as follows in your records:
CamaPlan
122 E. Butler Ave, Suite 100
Ambler, PA 19002
Phone: 215-283-2868 Fax: 973-302-8622
All notices concerning the investment in the entity should be sent to the Administrator at the above address, with a copy to the Account Owner. Any questions pertaining to the Account should be referred to the Administrator.
6. I understand that all payments, income, distributions or payoffs for this investment must be sent to the Administrator and/or Record-keeper for the benefit of the Account Holder. Under the Internal Revenue Code, it is not acceptable to send funds directly

to the Account Owner's (or the Account Owner's nominee or designee) personal funds.

- 7.** I understand that funds for all expenses generated to support and maintain the asset in an account needs to come from the account. (example; property taxes, mortgage payments, homeowner association dues).
- 8.** I understand that with some types of accounts there are rules for Required Minimum Distributions (RMDs) from the account. If I am now subject to the RMD rules in my account, or if I will become subject to those rules during the term of this investment, I represent that I have verified either that the investment will provide income or distributions sufficient to cover each RMD, or that there are other assets in my account or in other accounts that are sufficiently liquid (including cash) from which I will be able to withdraw my RMDs. I understand that failure to take RMDs may result in a tax penalty of 50% of the amount I should have withdrawn.
- 9.** I understand I am to provide the Administrator with a year-end fair market value of the Account by January 15th of each year, in a form acceptable to the Administrator. The Administrator, acting on behalf of the Custodian, is required to send the Account Owner a year end account statement by January 31 each year showing the value as of December 31 of the prior year. This valuation information is also reported to the IRS on Form 5498. The fair market value information is needed in order to complete that reporting.
- 10.** I understand that in the event of a change with the investment ownership, for example, account owner death, distribution of asset, conversion or divorce the account holder or new account holder will be responsible for change to the title of investment, notifying the Administrator and providing Administrator with updated documents.
- 11.** I understand that the Account is a separate entity and I have no right to sign on behalf of the account, or to sign for the Custodian, Administrator and/or the Record-keeper. The Administrator may request that you initial the documents as verification of approval.
- 12.** I understand the Account Owner may not personally guarantee on behalf of the Account any indebtedness of the investment to a third party nor may the Account Owner guarantee any indebtedness of the Account to the entity.
- 13.** I understand that in processing this transaction the Custodian, the Administrator and/or the Record-keeper are only acting as my agent. I agree that the Custodian, the Administrator and/or the

Record-keeper will not be liable for any investment losses sustained by me or my account as a result of this transaction. I agree to indemnify and hold harmless the Custodian and the Administrator any and all claims, damages, liability, actions, costs, expenses (including reasonable attorneys' fees) and any loss to my account as a result of any action taken in connection with this investment transaction.

- 14.** Because of federal privacy laws the Administrator is not able to answer third party inquiries about the Account unless the Account Owner has filed with the Administrator an original Interested Party Designation or Limited Power of Attorney, with the signature(s) either notarized or Medallion Guaranteed, giving the person making the inquiry authority to obtain information on the Account.
- 15.** I understand the administrator's EIN can only be used for interest or dividend payments. If an EIN is needed for any reason other than dividend or interest payments I will be required to procure an EIN for my IRA. I also understand my social security number cannot be used for account reporting.
- 16.** I understand the Custodian and Administrator shall have no duty other than to follow my written instructions, and shall be under no duty to question said instructions and shall not be liable for any investment losses sustained by the Depositor under any circumstances. By performing services under this Agreement, the Custodian and the Administrator are acting solely as my agent, and nothing in this Agreement shall be construed as conferring fiduciary status on the Custodian or the Administrator. I agree to indemnify and hold harmless the Custodian and the Administrator from any and all claims, damages, liability, actions, costs, expenses (including reasonable attorney's fees) and any loss to the Custodial Account, to me or to my beneficiary(ies) as a result of any action taken (or omitted to be taken) pursuant to and/or in connection with any investment transaction directed by me or my investment advisor or resolution from serving as the Custodial or the Administrator, including without limitation, claims, damages, liability, actions and losses asserted by the me or my beneficiary(ies).

In the event you read the Asset Purchase Disclaimer and Indemnity Agreement and do not understand all or part of this document, please seek legal counsel before executing the asset purchase.