

**TO BE COMPLETED BY BORROWER**

Name of Borrower \_\_\_\_\_

Borrower's Address \_\_\_\_\_  
Street City State ZIP

Borrower's Info \_\_\_\_\_  
Soc. Sec. No Tax ID Number

Name of Lender \_\_\_\_\_

CamaPlan has received instructions for the above referenced IRA holder concerning his or her intent to lend IRA funds. As this asset is to be held in an Individual Retirement Account, the following instructions must be followed to ensure compliance with both IRS requirements and CamaPlan policy. **Please initial all items in the spaces provided showing your intent to comply.**

- \_\_\_\_\_ 1. Lender name to be written as: CamaPlan Administrator FBO (client name) IRA.  
Address: 122 East Butler Ave, Suite 100, Ambler, PA, 19002
- \_\_\_\_\_ 2. The original note showing proper vesting is to be held by CamaPlan.
- \_\_\_\_\_ 3. All payments, income distributions and/or payoffs for this holding must be sent to CamaPlan. Under the Internal Revenue Code, it is never acceptable to send funds directly to an IRA holder or an IRA holder's nominee. Should this happen, you agree to indemnify CamaPlan against all liability concerning IRS compliance.
- \_\_\_\_\_ 4. If an IRA holder has any questions concerning the IRA, such as, but not limited to, payments, distributions or fees, you agree to inform the IRA holder to contact CamaPlan directly. Under no circumstances will third party inquiries be answered.
- \_\_\_\_\_ 5. You agree to honor all written instructions by CamaPlan concerning changes in asset registration.
- \_\_\_\_\_ 6. You agree to inform CamaPlan promptly of any changes in address, telephone number, or company status (such as bankruptcy filings, regulatory agency investigations or litigations).
- \_\_\_\_\_ 7. If an IRA holder is subject to Required Minimum Distributions, you agree to provide a written plan detailing how this requirement is met.
- \_\_\_\_\_ 8. You acknowledge and agree that CamaPlan will not record principal balance changes unless amortization numbers are provided with each payment.
- \_\_\_\_\_ 9. Fair Market Value(FMV) must be provided annually.

\_\_\_\_\_  
**Signer / Borrower's Printed Name**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Authorized Signer / Borrower's Signature**