

# Automatic Monthly Contribution Election Form



Account Holder Information:

Account Holder Name:  IRA Account #

Address:  Social Security #

City:  State:  Zip Code:

New Instructions  Change of existing instructions

Name on Bank Account:  Bank Phone Number:

Bank Name:  (Must be a 9 digit number)

ABA/Routing #:

Bank Account #:

Type of Account:  Checking Account  Savings Account

IRA Account Type:  Traditional  Roth  SEP IRA

Amount of Contribution \$

Date of Recurring Monthly Deposits:  (If no date is selected the deposit will be processed by The Kingdom Trust Company monthly on the 20th)

By signing below I authorize the automatic recurring monthly withdrawal of the amount listed above from the bank account designated above and hereby direct that it be contributed to my IRA account listed above. This election will remain in force until I give The Kingdom Trust Company a request in writing for it to be stopped. I agree that initiation of, discontinuation of, and any changes to this request could take up to 10 business days to reflect and process. In the event that any of the above information changes, I agree to notify The Kingdom Trust Company in writing immediately. If I neglect to inform and confirm such changes to the above information, I agree to hold harmless and defend The Kingdom Trust Company and the custodian of my IRA, and its respective officers, directors, managers, members, employees, representatives, agents, owners, successors and assigns from any and all loss, damage, injury and expense of any nature, including attorneys' fees, that may be incurred.

I understand that should the bank listed above have insufficient funds in my above referenced account on the date of the withdrawal, The Kingdom Trust Company will charge me a \$50 insufficient funds fee. In addition, I understand that if the bank account has insufficient funds The Kingdom Trust Company has the right to cancel these instructions without any written or verbal notification. In the event that the funds are recalled and they have already been invested, I agree that the funds may be redeemed from said investment. If they are invested in an illiquid investment I agree to make the account whole within 24 hours of receiving notification from The Kingdom Trust Company.

Account Holder Signature:  Date:

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