



Instructions:

- Use this form to authorize and direct Goldstar Trust Company to pay expenses related to your real estate investment held within your IRA. Please include a copy of the invoice/bill with this form.
- Related expenses may include: Property Taxes, Insurance Premiums, HOA Dues, Repairs or Improvements, Management Fees, Nonrecourse Loan Payments, and Utility Payments.
- Payment will be made only to an unrelated third party. In addition, per IRS Code Section 4975, no payment can be made to a disqualified person.
- Payment will not be made to reimburse the IRA owner for expenses paid out of pocket.
- Payment will be made only for the IRA owner's percentage of ownership held in the real property.
- Fees - No fee is incurred if a check is being issued. If payment requires expedited delivery, please refer to our fee schedule for the applicable fee for wire or overnight delivery charges.
- Submit form and invoice to Goldstar.

1. ACCOUNT INFORMATION:

NAME: (as it appears on your account application)		GOLDSTAR ACCOUNT NUMBER:	
PRIMARY PHONE NUMBER:		PERCENTAGE OF OWNERSHIP: %	

2. PAYMENT INFORMATION:

PAYEE NAME:		AMOUNT:	
REFERENCE ON PAYMENT:		PAYMENT FREQUENCY: <input type="checkbox"/> ONE-TIME <input type="checkbox"/> RECURRING	

RECURRING EXPENSES (to be used only for HOA dues and non-recourse loan payments)

DUE DATE:		END DATE: (if applicable)	
FREQUENCY: <input type="checkbox"/> Monthly <input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> As Invoiced		CURRENT OR CANCELLATION: <input type="checkbox"/> New Recurring Payment <input type="checkbox"/> Cancel existing recurring payment	

***Recurring expenses will only be sent via check by regular mail. Unless instructed otherwise, the check will be issued 5 days prior to the Due Date. Recurring expenses must be the same amount and due date for each scheduled payment.

3. DELIVERY INSTRUCTIONS:

SEND FUNDS BY CHECK:

ADDRESS:	CITY:	STATE:	ZIP:
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SEND FUNDS BY WIRE:

BANK NAME:		ROUTING/ABA NUMBER:	
BANK ADDRESS:	CITY:	STATE:	ZIP:
RECIPIENT NAME:	RECIPIENT ACCOUNT NUMBER:	FOR FURTHER CREDIT TO/PAYMENT DETAILS:	

