



**SPECIAL INSTRUCTIONS FOR  
LARGE DEPOSITS > \$25,000**

**Plan Name:** \_\_\_\_\_  
Trustee: \_\_\_\_\_ Plan #: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

We are in receipt of the following check. Our internal controls and audit procedures require a Trustee's authorization to process. Notify us **immediately** if there are "Specific Instructions" for this deposit.  
**This form must be returned to The Pension Specialists, Ltd. (via fax) with 24 hours of receipt.**

Check Issuer: \_\_\_\_\_  
Check Amount: \$ \_\_\_\_\_ Date Received: \_\_\_\_\_

**Check only one box:**

- Standard Procedures:** The check will be deposited into the current investment allocation.
- Special Instructions:** Give detailed instructions. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Trustee's Authorization:

*As trustee of the plan, I give authorization to deposit contributions as listed above.*

Trustee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For use by The Pension Specialists Ltd. only**

There are no special instructions for this deposit – use "Standard Procedures".

Sr. Administrator Override: \_\_\_\_\_ Date: \_\_\_\_\_