



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: _____