

### 1 GENERAL INFORMATION

<b>Account Holder's Name</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. _____	<b>Advanta IRA Account No.</b>	<b>Deposit Amount</b>
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### 2 REASON FOR DEPOSIT\*

<input type="checkbox"/> <b>Contribution</b> For Tax Year: _____  <b>Type of Account:</b> <input type="checkbox"/> Traditional <input type="checkbox"/> Roth <input type="checkbox"/> SEP <input type="checkbox"/> ESA <input type="checkbox"/> Simple <input type="checkbox"/> HSA <input type="checkbox"/> Employee or <input type="checkbox"/> Employer	<input type="checkbox"/> <b>Rental Income</b> For: _____ (Property Address)
<input type="checkbox"/> <b>Mortgage/Loan Payment</b> <input type="checkbox"/> Interest Only <input type="checkbox"/> Amortized For: _____ (Property Address or Borrower)	<input type="checkbox"/> <b>Other Income</b> For: _____ (Asset Name/Description)

*\*If the funds to be deposited are for a rollover, direct rollover, IRA transfer, or the sale of an asset, please do NOT use this form. Instead, please use the Rollover/ Direct Rollover Certification Form or Sale Authorization Form as appropriate.*

**Client Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_