



Self Directed IRA SERVICES INC

A subsidiary of Horizon Bank

SELF DIRECTED IRA Investment Direction

For IRA Investors of **LendingClub**

Traditional • Roth • SEP

Send completed
forms to:

LendingClub
71 Stevenson St, Ste 300
San Francisco, CA 94105
Phone: 866.811.9225
Fax: 415.632.5611
Email: retire@lendingclub.com

Your IRA
Custodian is:

Self Directed IRA Services, Inc.
7901 Woodway Drive, Suite 200
Waco, TX 76712
Phone: 866.928.9394 or 512.637.5739
Fax: 512.495.9554
Email: LendingClub@sdiraservices.com

1 Provide your information.

✎ Complete all information in this section to avoid processing delays. ✎

Your Name	<input type="text"/>	Your Social Security Number	<input type="text"/>
Your Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
	<input type="text"/>	Zip	<input type="text"/>
Your Date of Birth	<input type="text"/>		
Email Address	<input type="text"/>		
Daytime Phone	<input type="text"/>		

2 Complete your direction to invest funds in your LendingClub account.

I hereby direct, authorize and instruct Self Directed IRA Services, Inc. ("SDIRA Services") to make the following investment purchase, in the manner indicated, on behalf of my self directed IRA account.

Investment Name:	LendingClub Member Payment Dependent Notes	Amount to Invest:	\$ <input type="text"/>
Funding Method:	I authorize SDIRA Services to wire my investment purchase to LendingClub as follows: Bank Name: Wells Fargo Address: 420 Montgomery Street, San Francisco, CA 94104 ABA #: 121000248 SWIFT Code: WFBUS6S For Credit To: Account # 4121648281 For Further Credit To: Name on LendingClub Account: <input type="text"/> Your LendingClub Screen Name (if known): <input type="text"/>		

3 Sign below to authorize this investment direction.

I understand that SDIRA Services will fund my investment upon its receipt of my IRA Transfer/Rollover/Contribution proceeds. In directing the purchase of this Investment, I understand that my Account will be charged or credited as appropriate with the net earnings, gains, losses and expenses, as well as appreciations or depreciations in market value of the investments held in my IRA Account. I agree to hold SDIRA Services harmless from any liability for any loss, damage, injury or expense which may occur as a result of the execution of this Investment Direction. I understand that SDIRA Services will have a reasonable amount of time to complete the processing of my instructions.

Sign Here

Accountholder Signature

Date

Accountholder's Printed Name