

Email: info@tradingdirect.com

Wire Authorization Form

This form is used to provide authorization by the account owner(s) to issue a wire payment from an account. This form is not to be used for third-party requests or IRA distributions.

STEP 1: ACCOUNT INFO Account Title (Name of the			Account Number				
Phone Number – best number during business hours					PHONE NUMBER MAY BE REQUIRED FOR VERIFICATION		
STEP 2: PAYMENT MET	THOD - SELECT DOMESTIC	(ABA) OR	Internationa	L (SWIF	T) Wire		
SPECIFY DOLLAR AMOU	JNT: \$		_				
☐ Domestic ABA Wire	Bank Name						
ADA WIIC	City			State	ABA/Routing Number		
	Bank or Credit Union Account Number						
	Bank or Credit Union Account Title (Must match brokerage account title)						
	For Further Credit (if applicable):						
□ International SWIFT Wire	Bank Name						
	City				Province/Country		
	SWIFT Code	IBAN	Number (optiona	al)	ABA Number of US Bank Affiliate (optional)		
	Bank Account Number						
	Bank Account Title (Must match brokerage account title)						
STEP 3: SIGNATURES –	ALL ACCOUNT HOLDERS M	UST SIGN B	ELOW				
	pelow, I represent to Axos Clear all and accurate and represents			livision of	York Securities, Inc., that the information		
Account Holder Signature			Print Name		Date		
×							
Secondary Account Holder Signature (if applicable)			Print Name		Date		
×							
	YOUR ACCOUNT ARE REQUIRED TO SIG COUNTS, SEPARATE SUPPORTING DOC		CONFIRMING THE SIGI	NATURE AUT	THORITY FOR THE ACCOUNT IS REQUIRED.		
PRINCIPAL SIGNATURE	E – TRADING DIRECT, A DIV	VISION OF Y	ORK SECURITIE	s, Inc.			
	that I spoke with my client iden d correct and have originated w			irmed tha	t the instructions contained in this letter of		
Signature	a somete and have originated w	my enem	Print Name		Date		
*							
STED A. SUBMISSION O	F FORM - Completed forms	should be see	nt to Tradina Disc	act a divid	sion of Vark Securities Inc.		

Mail: 160 Broadway, East Bldg Floor 9, New York NY 10038

Fax: 212-202-4655