



Your MONEY...Your WAY

WITHDRAWAL REQUEST FORM

To withdraw funds or close an account, fill out and sign the Withdrawal Request Form. All open positions must be closed prior to any withdrawals. The request will be processed within 2 business days of receipt of this form

PERSONAL INFORMATION

Please write in the box
Check/Cash/Wire

Customer Name: Withdraw Method:

Account Number: IB Name (if any):

Telephone: Fax:

Address: Customer Password:

WITHDRAW & BANK INFORMATION

Withdrawal Amount in US\$ Credit out Amount in US\$:

Bank name: ABA or Swift #

Bank Address: Account #:

The undersigned hereby authorize(s) 4exHouse to withdraw the requested amount above from the account requested by this form.

CLIENT	INTRODUCING BROKER
<input type="text"/>	<input type="text"/>
(PRINT CUSTOMER NAME)	(PRINT INTRODUCING BROKER NAME)
<input type="text"/>	<input type="text"/>
(SIGNATURE)	(SIGNATURE)
<input type="text"/>	<input type="text"/>
(DATE)	(DATE)