

WITHDRAWAL REQUEST FORM

	·	iness da	ays if received by HOUSE OF BÖRSE in the UK	
before 11 AN	VI. Username:		Comments:	
Account:	Username:		Comments.	
Customer Name:				
Withdrawal Amoun	t:			
currency:	USD EUR GBP			
Mailing Address:				
City:		Telep	phone:	
State/Province		Zip (Code:	
Country:				
Email Address:				
_				
Beneficiary Bank: (Required for Wire Transfer Withdrawals Only)				
ABA or Swift Code:	:			
Bank Name:				
Bank Address:				
Beneficiary Name:	eneficiary Name:			
Bank Account #:				
Method of Payment:		Will Your Account be closed?		
Wire Transfer (Bank Fees Applied to withdrawal amount)		(\$50 minimum balance to maintain an account) ☐Yes ☐No		
INSTRUCTIONS Please Email this	form via email to treasury@houseofborse.co	om		
(Note: if closing your account HOUSE OF BORSE will close all open positions at the current market rate if not closed by the client) HOUSE OF BÖRSE will not be responsible for margin calls due to customer requested withdrawal.				
THE ABOVE INFORMATION MUST BE COMPLETED IN FULL TO PROCESS THIS REQUEST I/We hereby represent that the information provided by me/us is true and correct. I/We further represent that I/we will notify HOUSE OF BÖRSE of any material changes in writing. HOUSE OF BÖRSE reserves the right, but has no duty, to verify the accuracy of information provided, and to contact various sources as it deems necessary.				
Name:			Client's Signature	
Date (DD/MM/YYYY):				

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