



Wire Transfer Request

Date: _____ ☐ Domestic Wire ☐ International Wire

Velox Account # _____ Amount: _____

Account Name: _____

Phone # _____ Email address: _____

Beneficiary Information:

Beneficiary name: _____

Address: _____

City: _____ State: _____ Postal/Zip: _____ Country: _____

Beneficiary Bank information:

Beneficiary Bank Account #: _____

Beneficiary Bank Name: _____

Beneficiary Bank

ABA Routing #/Swift Code(International Wire): _____

Beneficiary Bank Address: _____

City: _____ State: _____ Postal/Zip: _____ Country: _____

Intermediary Bank Information; (If applicable)

Intermediary Bank Name : _____

ABA Routing #/Swift Code(International Wire): _____

Intermediary Bank Address: _____

City: _____ State: _____ Postal/Zip: _____ Country: _____

Other information: _____

Customer Authorization:

Reason for transfer: _____

x _____

Customer Signature

x _____

Joint Account Holder Signature

Registered Principal Approval:

Print Name	Title	Signature	Date
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I agree to hold all parties acting on this request, including the introducing broker and Velox Clearing LLC, and their respective agents and employees (hereinafter, collectively, "the parties") harmless from any and all claims, demands, proceedings, suits and actions and all liabilities, losses and expenses including without limitation those asserted by me, associated with actions taken by the parties due to instructions received from me in this request.

For Internal Use Only

Compliance Office Approval/Registered Principal Approval:

Print Name	Title	Signature	Date
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