

Letter of Authorization to Transfer Funds or Securities

Sub Firm #	BR Code	FA Code	Account Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(Office Use Only)

ACCOUNT INFORMATION

Account Title	Purpose of Transfer – required for UTMA/UGMA, IRA, and Wire Funds
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TYPE OF TRANSFER

- One-Time Disbursement:** Any future requests will require a new Authorization form.
- Standing Instructions:** Requests for periodic transfers of a specific amount or transaction type and specific schedule or periodic transfers at the client's discretion with the amount not to exceed a specific threshold.

Start Date: _____ Expiration Date*: _____ Frequency: _____ (weekly, monthly, etc.)

*For standing instructions, if no expiration date is specified, transfers will continue until you revoke these instructions.

ASSETS TRANSFERRED

- Funds Disbursement(s):** One-Time Amount: \$ _____ **OR** All cash and money market **OR** All Funds and Securities **AND** Transfer Residual Cash Balances for 90 Days
 *If selected, Cash Residual Transfer would only apply to Full Account Journals
- Periodic Amount: \$ _____ **OR** Not to exceed amount: \$ _____

OR Transaction (dividends/interest, sale proceeds, etc.): _____

Security Disbursement(s): All Securities **OR** Listed below. If needed, attach additional Position Listings on a separate sheet.

Number of Shares	Security Description	Symbol or CUSIP	Number of Shares	Security Description	Symbol or CUSIP

DISTRIBUTION INSTRUCTIONS Delivery of shares is the only option available to IRA accounts using this form. The IRA Distribution Request form is also required.

<input type="checkbox"/>	Deliver Shares or Funds: <input type="checkbox"/> Intra-firm to Another Account <input type="checkbox"/> to Another Financial Firm	Account Title	Account Number
		Firm Name	Delivery Instructions
<input type="checkbox"/>	Mail Check. (A fee may apply)	Payee/Recipient	Account Number
		Payee/Registrant's Address (include City, State, Zip Code, and Country)	Registrant's SSN or Tax ID
<input type="checkbox"/>	Wire Funds. (A fee may apply) (Domestic or Foreign)	Bank Name	ABA Routing Number (Domestic Only)
		Bank Address	Bank City Bank State Bank Country (Foreign Only)
		Name on Bank Account	Account Number Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings
		Recipient Name	Recipient Address (include City, State, Zip Code, and Country - No PO Box or APO)
		Swift/BIC Code (Foreign Only)	IBAN Number (if applicable) Country/Local Routing Code (if applicable)
		Intermediary Bank Name	Account Number Intermediary Bank Information
		Special Instructions	Further Credit (if applicable)
		Foreign Currency Distribution: Send: (currency) _____ (in the amount of) _____	<input type="checkbox"/> Foreign Currency <input type="checkbox"/> U.S. Dollar Equivalent

CLIENT SIGNATURES (If required) (Do not sign below unless you have read and understand all terms and conditions on page 2.)

Signature 1 X	Name (Please Print)	Date
Signature 2 X	Name (Please Print)	Date
Signature 3 X	Name (Please Print)	Date

ASSOCIATE AND SUPERVISORY SIGNATURES

The undersigned certifies that the account holder(s) authorized the terms of the transfer of funds and/or securities as described in this form. The undersigned further certifies that all handwritten portions of this document were filled in before account holder(s) signature(s) and that this document was not altered after being signed by account holder(s).

Associate's Signature X	Associate's Name	Date
Qualified Supervisor's Signature X	Qualified Supervisor's Name	Date

Distribution Instructions:

- 1) FCC Copy - Forward to receptive Operations Section
- 2) Correspondent Firm - Retain in Office Files
- 3) Client Copy - Provide to Client

- Credit - Journal Entry Vault - a) Non-Negotiable b) Re-Registration
 Transfer - Special Registration

SR #

ALL ACCOUNT OWNERS OR PERSONS SIGNING ON BEHALF OF ACCOUNT OWNERS HEREBY AGREE TO THE FOLLOWING TERMS:

In consideration of Introducing Broker accepting the instructions on the reverse side of this document, I hereby release and discharge Introducing Broker and its clearing firm, First Clearing, LLC ("FCC") and their respective affiliates from any liability or claims in connection with the aforementioned instructions and agree to indemnify and hold Introducing Broker and FCC harmless against any losses from any action, claim, or demand of any person based upon Introducing Broker and/or FCC acting under these instructions.

For transfers to third party accounts of which you have no ownership interest, you agree that by signing this document that you are hereby irrevocably relinquishing all rights, title, and interest to the assets(s) listed on page 1 of this document.

International Wire Transfers: The recipient account number and bank identification number (e.g., IBAN, RTN, or SWIFT BIC) you provided must be complete and accurate. **You could lose the entire transfer amount if this information is incorrect.**

I hereby acknowledge that I have read and understand the terms of this request to transfer assets and further acknowledge that the terms of this request are binding regardless of any other agreement(s) between me and the recipient(s) of these assets.

BY SIGNING THE FIRST PAGE OF THIS DOCUMENT, THE SIGNED ACKNOWLEDGE THAT THEY HAVE READ AND UNDERSTAND THE FOREGOING.