



127 East Ridgewood Ave. ♦ Suite 201 ♦ Ridgewood, NJ 07450
Phone: 201-345-2210 ♦ Fax: 201-345-2211

WITHDRAWAL REQUEST FORM

- Indicate your 8 digit ID# on all wires, checks and withdrawal requests.
 - Fill out form completely before printing.
- (Note: if closing an account FX Solutions LLC will close all open positions if not done so by client)

Date: (mm/dd/yy) _____ Withdrawal Amount in USD : \$ _____

Account FX # or User ID: _____

Customer Name: _____

Customer Mailing Address: _____

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

Telephone: _____ Email: _____

Beneficiary Bank

ABA or SWIFT Code: _____

Bank Name: _____

Bank Address: _____

Beneficiary Name*: _____

Bank Account #: _____

- FX Solutions LLC, account holder only correspondent
- FX Solutions LLC may not make third party payments

Intermediary Bank (if necessary) **

ABA or SWIFT Code: _____

Bank Name: _____

Bank Address: _____

Beneficiary Name: _____

Bank Account #: _____

** International Wires **must** have a US bank

Method of Payment: Check Wire Transfer (Bank Fee Applied)

Will your account be closed? YES NO (\$50 minimum balance to maintain an account)

Primary Account Holder Signature: _____

Joint Account Holder Signature: _____

Fax this completed form to FX Solutions, LLC to (201) 345-2211

All requests for withdrawal will be processed within 2 business days of receipt of this form

Thank you for using FX Solutions, LLC

(FOR OFFICE USE ONLY)

Date: _____

Account #: _____

Introducing IB: _____