

Appendix № 14 to the General Terms of Business

INSTRUCTION FOR WITHDRAWAL

Reviewed by: CO Date of last review: 27/11/2023 Date of next review: 27/11/2024 Approved by BOD: 30/11/2023

Client:			
Authorized representative (If applica	ble):		
		_	
Number and Date of your Brokerage	Account*:		
Please transfer funds from my broke	arage account		
ricase transfer funds from my broke	rage account		
Amount			
in figures	currency	in letters	
to the following bank details:			
Deneficiary of nayment			
Beneficiary of payment			
Beneficiary's account (IBAN)			
Beneficiary's Bank			
Beneficiary Bank Address			
Beneficiary Bank SWIFT			
Correspondent Account			
Intermediary Bank			
Payment details			



Signat	ure of the C	lient
	,	
	Doto	