

Wire Authorization Form

This form is used to provide authorization by the account owner(s) to issue a wire payment from an account. This form is not to be used for third-party requests or IRA distributions.

STEP 1: ACCOUNT INFORMATION

Account Title (Name of this account)	Account Number
Phone Number – best number during business hours	PHONE NUMBER MAY BE REQUIRED FOR VERIFICATION.

STEP 2: PAYMENT METHOD - SELECT DOMESTIC (ABA) OR INTERNATIONAL (SWIFT) WIRE

SPECIFY DOLLAR AMOUNT: \$ _____

Domestic
ABA Wire

Bank Name		
City	State	ABA/Routing Number
Bank or Credit Union Account Number		
Bank or Credit Union Account Title (Must match brokerage account title)		

For Further Credit (if applicable):

International
SWIFT Wire

Bank Name		
City	Province/Country	
SWIFT Code	IBAN Number (optional)	ABA Number of US Bank Affiliate (optional)
Bank Account Number		
Bank Account Title (Must match brokerage account title)		

STEP 3: SIGNATURES – ALL ACCOUNT HOLDERS MUST SIGN BELOW

<i>By affixing my signature below, I represent to Axos Clearing LLC and York Securities, Inc., that the information contained above is truthful and accurate and represents my instruction.</i>		
Account Holder Signature	Print Name	Date
x		
Secondary Account Holder Signature (if applicable)	Print Name	Date
x		

-ALL REGISTERED OWNERS ON YOUR ACCOUNT ARE REQUIRED TO SIGN THIS FORM.
-FOR BUSINESS AND TRUST ACCOUNTS, SEPARATE SUPPORTING DOCUMENTATION CONFIRMING THE SIGNATURE AUTHORITY FOR THE ACCOUNT IS REQUIRED.

PRINCIPAL SIGNATURE – YORK SECURITIES, INC.

<i>By signing below, I attest that I spoke with my client identified above and verbally confirmed that the instructions contained in this letter of authorization are true and correct and have originated with my client.</i>		
Signature	Print Name	Date
x		

STEP 4: SUBMISSION OF FORM - Completed forms should be sent to York Securities, Inc:

Email: info@yorksec.com	Fax: 212-202-4655	Mail: 160 Broadway, East Bldg Floor 9, New York NY 10038
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