Letter of Authorization -3rd Party Distributions

Page 1 of 1 LOA3 03/2019

This form is used to provide authorization by the account owner(s) to issue a check or a wire payment to an alternate party that results in a change of beneficial ownership. This form is not intended to be used for ACAT transfers.

Brokerage Account Title (Name of this account) Brokerage Account Title (Name of this account)					Brokerage Account Number
					Brokerage Account Number
Phone Number – best number during business hours					PHONE NUMBER, NOTARY OR MEDALLION STAMP IS REQUIRED FOR VERIFICATION.
STEP 2: AMO	OUNT/TYPE OF REQUEST	Γ			·
Dollar Amount	: \$	☐ Or	ne time only	(default) \square Standing Instru	ictions STANDING INSTRUCTIONS ARE VALID FOR
STEP 3: THIRD PARTY PAYMENT METHOD — CHECK OR WIRE - Select only one					ONE YEAR FROM SIGNATURE DATE BELOW. NOT AVAILABLE FOR IRA ACCOUNTS.
☐ Check	Make Check Payable to:	:			A THIRD PARTY DISTRIBUTION RESULTS IN A
	Mail Check to:	CHANGE OF BENEFICIAL OWNER. EXAMPLES:			
					JON SMITH PAY TO: JON & MARY SMITH
					JON & MARY SMITH PAY TO: JON SMITH JON SMITH PAY TO: MARY SMITH
		<u></u> !			
☐ Wire	Bank Name				THIRD PARTY DISTRIBUTIONS FROM AN IRA ACCOUNT ARE LIMITED TO THE FOLLOWING:
	City	State		ABA/Routing Number	-ALTERNATIVE INVESTMENTS
					-CHARITABLE DONATIONS PAYMENTS TO ANOTHER FINANCIAL
	3 rd Party Beneficiary Name 3 rd Party Beneficiary Account Number				INSTITUTION FOR THE BENEFIT OF THE
	3 rd Party Beneficiary Address				ACCOUNT OWNER ARE CONSIDERED TRANSFERS AND MUST BE SUBMITTED AS
	Intermediary Bank Name (if applicable) Intermediary Bank Account Number				SUCH. FOREIGN ACCOUNT OWNER THIRD PARTY
					REQUESTS ARE SUBJECT TO ADDITIONAL
	City	State		Swift Code/IBAN	REVIEW.
	Purpose of Wire				
_		_			
		AMP GUARANTE	E		IF PHONE VERIFICATION IS UNABLE TO BE
riease use spa	ice below				COMPLETED, A NOTARY OR A MEDALLION STAMP GUARANTEE IS REQUIRED.
	_	_	-	rokerage firm that the inform	nation
By affixing my signature below, I represent to A		· , , , , , , , , , , , , , , , , , , ,	· ·		-ALL REGISTERED OWNERS ON YOUR
×					BROKERAGE ACCOUNT ARE REQUIRED TO SIGN THE SAME FORM.
Account Holder Signature		Print Na	Print Name		-FOR BUSINESS AND TRUST ACCOUNTS,
×					SEPARATE SUPPORTING DOCUMENTATION CONFIRMING THE SIGNATURE AUTHORITY
SIGNATURE	AMOUNT/TYPE OF REQUEST One time only (default)				FOR THE BROKERAGE ACCOUNT IS REQUIRED
General Princi					
×					
		•			 _

Clearing, custody or other brokerage services provided by Axos Clearing LLC, Member FINRA and SIPC. Axos Clearing LLC is a subsidiary

of Axos Financial, Inc. Trademark(s) belong to their respective owners.