

Funds Withdrawal Request

| Client information: |
|--|
| Mrs. Mr. |
| |
| Surname: |
| Family Name: |
| Please Debit my/our Account, the Sum of: |
| Account Number: |
| Bank Name: |
| Bank Address: |
| Bank Sorting Code(Bic,Swift Code,ABA,Routing No): |
| Beneficiary's Name: |
| Account No. Or IBAN: |
| Bank Account Currency: |
| Phone No: |
| <u>Instrucions</u> |
| To request a withdrawal of funds, kindly Fill out this form and send it via email to |
| backoffice@jmibrokers.com or fax it to +678 23693 |
| Date: |
| Signature |
| |
| |
| |
| Contact us JMI Brokers LTD |
| OWI DIONEIS LID |

Address: 1276, Govant Building, Kumul Highway, Port Vila, Republic of Vanuatu:

Phone no: +678 24404 Fax no: +678 23693

Website: www.jmibrokers.com

Best Regard

