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WITHDRAWAL REQUEST FORM

All requests for withdrawal will be processed the same business day if received by FX Solutions in the USA by 11 AM ET.

Account # [] User Name [] Comments: []
Customer Name []
Withdrawal Amount US Dollars \$ []

Mailing Address []
City [] Telephone []
State/Province [] ZipCode [] Country []
Email Address []

Beneficiary Bank: (Required for Wire Transfer Withdrawals Only)

Intermediary Bank (if necessary):

ABA or Swift Code: [] Bank Name: [] Bank Address: [] Beneficiary Name: [] Bank Account #: []
ABA or Swift Code: [] Bank Name: [] Bank Address: [] Beneficiary Name: [] Bank Account #: []
For Further Credit To: (if applicable) []
•FX Solutions LLC, account holder only Correspondent
•FX Solutions LLC may not make third party payments

Method of Payment:

Will Your Account be Closed?

[] Check [] Wire Transfer (\$25 Bank Fee Applied to withdrawal amount)
[] Yes [] No (\$50 minimum balance to maintain an account)

NOTE: If closing an account, FX Solutions, LLC will close all open positions at the current market rate if not done so by client. FX Solutions, LLC will not be responsible for margin calls due to customer requested withdrawal.

THE ABOVE INFORMATION MUST BE COMPLETED IN FULL TO PROCESS THIS CHANGE

I/We hereby represent that the information provided by me/us is true and correct. I/We further represent that I/we will notify FX Solutions, LLC of any material changes in writing. FX Solutions, LLC reserves the right, but has no duty, to verify the accuracy of information provided, and to contact various sources as it deems necessary.

Primary Customer Signature _____ Date _____ Joint Customer Signature _____ Date _____
Print Primary Name _____ Print Joint Name _____