



Letter of Authorization

Frequency

Account Number _____

- One Time
 Permanent Record for All Disbursements

Transfers:

Please transfer the following assets into account number _____

Cash: \$ _____**Securities**

Quantity	Description	Cusip
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Domestic Wires: \$ _____

Client Bank Acct Registration: _____

Client Bank Account Number: _____

Bank Name: _____ Bank ABA/Routing Number: _____

Bank Address: _____ Bank City, State, Country: _____

Intermediary Bank Acct Registration: * _____

Intermediary Bank Account Number: * _____

Foreign Wires: \$ _____

Client Bank Acct Registration: _____

Client Bank Account Number: _____

Foreign Bank Name: _____ Swift Code: _____

Bank Address: _____ Bank City, State, Country: _____

U.S. Intermediary Bank Name: ** _____

U.S. Intermediary Bank ABA/Routing Number: ** _____

Signatures: Registered owner(s) of account must sign below

_____	_____
_____	Date
_____	_____
_____	Date
_____	_____
_____	Date
_____	_____
_____	Date

* If necessary
 ** Required