

## Appendix Nº14 to the General Terms of Business

## **INSTRUCTION FOR WITHDRAWAL**

Client:			
Authorized representative (If app	olicable):		
Number and Date of your Broker	age Account*:		
Please transfer funds from my br			
Amount in figures		in letters	_
to the following bank details:			
Beneficiary of payment			
Beneficiary's account (IBAN)			
Beneficiary's Bank			
Beneficiary Bank Address			
Beneficiary Bank SWIFT			
Correspondent Account			
Intermediary Bank			
Payment details			
* your brokerage account number a	nd date are stated in you	ur Application Form to the General Te  Signatu	erms of Business. re of the Client
		/	/ Date