

REQUISITION FOR WIRE/CHECK

ACCOUNT INFORMATION:

Account Name:

Account Number:

Please Transfer \$:

Phone Number:

FUND TRANSFER INFORMATION:

For Check Request:

Check Request (will ONLY be mailed to address on file)

Standard Mail Standard Overnight

Overnight Saturday

For Wire Request:

Bank ABA/SWIFT Number:

For Further Credit to:

Bank Name:

Bank Account Number:

Bank Location (City/State):

Name of Account:

Bank Account Number:

Customer's Signature:

Date/Time Field

Branch Manager's Signature:

Date/Time Field

Lightspeed Trading, LLC will not approve any wires/checks without this form completed. Both the customer's signature and the manager's signature must be on this form before any funds can be moved.

BELOW IS FOR INTERNAL USE ONLY:

Bank:

Wire:

Time:

Name:
