

Withdrawal Advice (Cash)

Withdrawn from: CFD Margin SBL

Client Name: _____

TR/Client Code: _____ / _____

Requested Amount: \$ _____

Collect Personally BY MAIL COLLECT BY TR

Pay Cash Account Losses Amount: \$ _____ Account: _____

Pay Cash Account Trades Amount: \$ _____ Account: _____

Pay IPO/Rights Amount: \$ _____ Account: _____

Bal Pay To Client Amount: \$ _____ Account: _____

Others: _____



Client Signature _____

NRIC/Passport No.: _____

Date (dd/mm/yyyy): _____

Verified By: _____

FOR OFFICIAL USE ONLY

CR BAL DIVIDENDS RETURN TO CLIENT SALE PROCEED OTHERS: _____

APPROVED LIMIT: \$ _____

POSITIONS AFTER WITHDRAWAL

TC / FE / CLOSE BA : \$ _____

TF / GLV / IM : \$ _____

PERCENTAGE(%) : \$ _____

PREPARED BY _____

SIGNATURE _____

DATE _____

REVIEWED & APPROVED BY _____

SIGNATURE _____

DATE _____

ACKNOWLEDGEMENT AND PROCESSING

NAME/ACCOUNT _____

SIGNATURE _____

DATE _____

UPDATE MFS BY _____

CHEQUE DETAILS

BANK

NUMBERS

DATE

CHEQUE RECEIVED BY _____

*Tick where appropriate

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SG/EXT/WITHDRAWLCASH /051/170224