



**FIRSTRADE SECURITIES INC.**  
 133-25 37<sup>th</sup> Ave. Flushing, NY 11354  
 Tel: 1-800-869-8800 Fax: 718-961-3919  
 Member FINRA / SIPC

## Wire Fund Authorization

- Please complete this form for processing wire funds from Firstrade to your financial institution.
- The name of the beneficiary must match the name on the Firstrade account.
- For funds going to a mortgage account, please provide your mortgage file number in the last box.
- We may contact you to verify information prior to processing the request for security reasons.

### 1. Firstrade Account Information

\_\_\_\_\_  
 Firstrade Account Number

\_\_\_\_\_  
 Firstrade Account Name(s)

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 Daytime Telephone Number

\_\_\_\_\_  
 City, State, Postal Code & Country

### 2. Receiving Bank Information

Wire Amount: \_\_\_\_\_

\_\_\_\_\_  
 Receiving Bank Name

\_\_\_\_\_  
 City and State

\_\_\_\_\_  
 Receiving Bank ABA (must contain 9 digits)

\_\_\_\_\_  
 SWIFT Code (international wire only)

\_\_\_\_\_  
 Intermediary Bank or Financial Information (if applicable)

\_\_\_\_\_  
 Intermediary Bank ABA or Account Number (if applicable)

\_\_\_\_\_  
 Beneficiary's Account Number at Bank

\_\_\_\_\_  
 Beneficiary's Account Name(s) at Bank

Notes:

\_\_\_\_\_  
 Account Holder Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Joint Account Holder Signature (if applicable)

\_\_\_\_\_  
 Date

#### For Office Use Only

Funds Verified \_\_\_\_\_ Telephone Confirmation: \_\_\_\_\_ Signature Verified: \_\_\_\_\_

Processed by: \_\_\_\_\_ Process Date: \_\_\_\_\_

Approved by: \_\_\_\_\_