



# 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