



A subsidiary of Axos Financial*

Third Party Distributions Letter of Authorization

This form is used to provide authorization by the account owner(s) to issue a check or a wire payment to an alternate party that results in a change of beneficial ownership. This form is not intended to be used for ACAT transfers.

STEP 1: ACCOUNT INFORMATION

Account Title (Name of account)	Account Number
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STEP 2: AMOUNT/TYPE OF REQUEST

Dollar Amount: One time only (default) Standing Instructions

STANDING INSTRUCTIONS ARE VALID FOR ONE YEAR FROM SIGNATURE DATE BELOW. NOT AVAILABLE FOR IRA ACCOUNTS. A THIRD PARTY DISTRIBUTION RESULTS IN A CHANGE OF BENEFICIAL OWNER. EXAMPLES:
 JON SMITH PAY TO: JON & MARY SMITH
 JON & MARY SMITH PAY TO: JON SMITH
 JON SMITH PAY TO: MARY SMITH

STEP 3: THIRD PARTY PAYMENT METHOD – CHECK OR WIRE - Select only one

Check

Make Check Payable to:	
Mail Check to:	
Check Purpose:	

Wire

Bank Name		
City	State	ABA/Routing Number
3 rd Party Beneficiary Name	3 rd Party Beneficiary Account Number	
3 rd Party Beneficiary Address		
Intermediary Bank Name (if applicable)	Intermediary Bank Account Number	
City	State	Swift Code/IBAN (IF APPLICABLE)
Purpose of Wire		

THIRD PARTY DISTRIBUTIONS FROM AN IRA ACCOUNT ARE LIMITED TO THE FOLLOWING:
 -ALTERNATIVE INVESTMENTS
 -CHARITABLE DONATIONS
 PAYMENTS TO ANOTHER FINANCIAL INSTITUTION FOR THE BENEFIT OF THE ACCOUNT OWNER ARE CONSIDERED TRANSFERS AND MUST BE SUBMITTED AS SUCH.
 FOREIGN ACCOUNT OWNER THIRD PARTY REQUESTS ARE SUBJECT TO ADDITIONAL REVIEW.

STEP 4: SIGNATURE(S)

By affixing my signature below, I represent to Axos Clearing LLC and my Registered Investment Advisor that the information contained above is truthful and accurate and represents my instruction.

Account Holder Signature x	Print Name	Date
Account Holder Signature x	Print Name	Date

REGISTERED INVESTMENT ADVISOR (RIA) SIGNATURE

By signing below, I attest that I spoke with my client identified above and verbally confirmed that the instructions contained in this letter of authorization are true and correct and have originated with my client.

Registered Investment Advisor Signature x	Print Name	Date
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INTERNAL SIGNATURE APPROVAL

Internal Signature x	Print Name	Date
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