

# Letter of Authorization

## -3<sup>rd</sup> Party Distributions

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**

<b>Brokerage Account Title (Name of this account)</b>	<b>Account Number</b>
<b>Phone Number – best number during business hours</b>	PHONE NUMBER, NOTARY OR MEDALLION STAMP IS REQUIRED FOR VERIFICATION.

**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.

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

Check

Make Check Payable to:	
Mail Check to:	

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

Wire

Bank Name		
City	State	ABA/Routing Number
3 <sup>rd</sup> Party Beneficiary Name	3 <sup>rd</sup> Party Beneficiary Account Number	
3 <sup>rd</sup> Party Beneficiary Address		
Intermediary Bank Name (if applicable)	Intermediary Bank Account Number	
City	State	Swift Code/IBAN
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: NOTARY OR MEDALLION STAMP GUARANTEE**

Please use space below

IF PHONE VERIFICATION IS UNABLE TO BE COMPLETED, A NOTARY OR A MEDALLION STAMP GUARANTEE IS REQUIRED.

**STEP 5: SIGNATURES – ALL ACCOUNT HOLDERS MUST SIGN BELOW**

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

Account Holder Signature <b>x</b>	Print Name	Date
Account Holder Signature <b>x</b>	Print Name	Date

-ALL REGISTERED OWNERS ON YOUR BROKERAGE ACCOUNT ARE REQUIRED TO SIGN THE SAME FORM.  
-FOR BUSINESS AND TRUST ACCOUNTS, SEPARATE SUPPORTING DOCUMENTATION CONFIRMING THE SIGNATURE AUTHORITY FOR THE BROKERAGE ACCOUNT IS REQUIRED.

**SIGNATURE –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.*

General Principal <b>x</b>	Print Name	Date
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