

DOMESTIC WIRE REQUEST FORM

DATE	WIRE AMOUNT	APEX ACCOUNT NO.	[
BENEFICIARY/RECIPIENT/FOR FURTHER CREDIT TO INFORMATION (Ultimate recipient of the wire transfer funds)			
Beneficiary/Recipient/For Further Credit to Name:			
Beneficiary Account No:			
*Beneficiary Address, City, State, Zip, Country: (Required)			
BENEFICIARY BANK INFORMATION (Financial Institution where the beneficiary maintains their account)			
Beneficiary Bank Routing Transfer No.			
*Bank N	ame (Required)		
*Beneficiary Bank Address, City, State, Zip, Country (Required)			
INTERMEDIARY BANK INFORMATION (Financial Institution where the wire must pass through before reaching the final beneficiary bank. This section is OPTIONAL and not required for all wires)			
Correspo	ndent Bank ABA:		
*Bank N	ame (Required)		
*Beneficiary Bank Address, City, State, Zip, Country (Required)			
CUSTOMER AUTHORIZATION			
Reason f	or Transfer:		
Customer Signature Joint Account Holder Signature			
I agree to hold all parties acting on this request, including the introducing broker and Apex Clearing Corporation, and their respective agents and employees (hereinafter, collectively, "the parties") harmless from any and all claims, demands, proceedings, suits and actions and all liabilities, losses and expenses including without limitation those asserted by me, associated with actions taken by the parties due to instructions received from me in this request.			
NOTARY			
Notary Seal:			
Notary Signature			
FOR INTERNAL USE ONLY			
Registered Principal Approval:			
Print Nan	ne Title	Signature	Date
Compliance Officer Approval/Registered Principal Approval			
Print Nan	ne Title	Signature	Date