



# FIRST RESOURCES

MEMBER: PHILIPPINE STOCK EXCHANGE

Date \_\_\_\_\_

## The First Resources Management & Securities Corporation

Unit 801-802, Tower One and Exchange Plaza

Ayala Avenue cor. Paseo de Roxas

Makati City 1226, Philippines

Tel. No. 848-6311 to 18

## REQUEST FOR WITHDRAWAL OF FUNDS

I/We hereby request for the withdrawal of the amount specified hereunder from my/our account:

Amount in words:

\_\_\_\_\_ (Php \_\_\_\_\_)

### Fund Withdrawal Instructions:

Check *(Payable to client's name, to be picked up from The First Resources' Business Address)*

Deposit to Bank Account *(Please provide bank details if funds will be deposited to a bank other than the client's bank account declared with The First Resources)*

Bank Name/Branch : \_\_\_\_\_

Account Type (CA / SA) \_\_\_\_\_

Account Number: \_\_\_\_\_

\_\_\_\_\_  
Client's Signature over Printed Name

Client Account No. \_\_\_\_\_

ID Type and No. \_\_\_\_\_ *(ID details needed for check pick up)*

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### WITHDRAWAL REPRESENTATIVE AUTHORIZATION

*(Accomplish this if someone other than the client is going to pick up the check)*

I/We hereby authorize my/our representative whose printed name and specimen signature appears below to pick-up the check/s of my withdrawn funds in my/our behalf.

\_\_\_\_\_  
Representative's Name

\_\_\_\_\_  
Representative's Signature

\_\_\_\_\_  
Client's Signature

*Note: Please attach a valid identification with signature of both the customer and representative*