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 Clearing services provided by Hilltop Securities, Inc. Member: NYSE/FINRA/SIPC

WIRE TRANSFER REQUEST & AUTHORIZATION FORM

This form may serve as a Letter of Authorization (LOA) to wire funds from your Hilltop Securities Inc. brokerage account to another financial institution. For same day service on non-third party wires, requests must be received by the Hilltop Securities Cashiering Department by 2:00 PM (CST). We may need to confirm your instructions prior to processing your request. It's understood that third party wires may not receive same day service and are subject to management approval. Customer verbal verification is required for all wires. To avoid delays please complete all required form fields.

CUSTOMER (SENDER) INFORMATION

Attention:		Requested By:	
Customer Account #:		Wire Amount (U.S. Dollars): \$	
Office Number:	Written Dollar Amount:		
Customer Account Name:		Customer Phone Number:	
Customer Physical Address:		<input type="checkbox"/> Domestic Wire <input type="checkbox"/> Foreign Wire	
Purpose of Wire Proceeds:		Charge Fee To: <input type="checkbox"/> Office # _____	
Relationship of Recipient if a Third Party:		<input type="checkbox"/> Customer <input type="checkbox"/> Rep # _____	

INTERMEDIARY BANK INFORMATION (If Applicable)

Intermediary Bank Name:	Bank ABA/ SWIFT/ IBAN/ CLABE Code:
Bank Address:	Country:

RECIPIENT BANK INFORMATION (Destination/ Beneficiary Bank)

Recipient Bank Name:	Bank ABA/ SWIFT/ IBAN/ CLABE Code:
Bank Address:	Country:

RECIPIENT (BENEFICIARY) INFORMATION/ FOR FURTHER CREDIT (Person or Entity Receiving Funds)
 (Please ensure that customer ownership documentation is attached if recipient is a related third party entity.)

Account Name of Recipient:	Recipient Account Number:	
Recipient Physical Address:		
City:	State & Zip Code:	Country:

SIGNATURES/ APPROVALS

By completing and signing this **Wire Transfer Request & Authorization Form** ("Authorization"), you are authorizing us to transfer funds as indicated on the Authorization and in accordance with the terms set forth in this "**Wire Transfer Authorization Disclosure and Agreement**" found on page 2 of this document.

Customer Signature:	Customer Printed Name:	Date:
Joint Customer/ Authorized Agent Signature:	Joint Customer/ Authorized Agent Printed Name:	Date:
Registered Representative Signature:	Registered Representative Printed Name:	Date:
Authorizer/ Principal Signature:	Authorizer/ Principal Printed Name:	Date:
<input type="checkbox"/> Customer Verbal Verification Obtained	Customer Verbal Verification Obtained By (Print Name):	Date:

For Hilltop Use Only:		
<input type="checkbox"/> Operations Verbal Verification Date: _____ Time: _____ Spoke with: _____ Operations Signature: _____	Third Party Wire Approval	OFAC Screening (Attach)
	Approving Manager's Signature:	Reviewed OFAC Screening Performed By (Print):
Indemnification <input type="checkbox"/> Repetitive Wire <input type="checkbox"/> LOA Attached or on File <input type="checkbox"/>	Date:	OFAC Passed <input type="checkbox"/> Contact AML Officer <input type="checkbox"/>

Wire Transfer Authorization Disclosure and Agreement

- I authorize Hilltop Securities (“Hilltop”) to transfer funds as shown on the wire request authorization form. I am responsible for the accuracy of the information.
- I understand that Hilltop reserves the right to reject this request in its discretion. I will not hold Hilltop liable for rejecting this request. In addition, I agree to indemnify Hilltop for any losses or damages that may arise in connection with this request.
- I understand that there is a fee associated with sending a wire, and that the funds will be withdrawn from my account when the wire is sent in accordance with the attached Schedule of Charges. I acknowledge that I have no right to cancel or amend the transfer request. If you ask us to cancel or amend it, we will make a reasonable effort to act on your request. However, you agree not to hold us liable if for any reason this transfer order is not amended or canceled.
- I understand that Hilltop may require further verification of wire requests via phone or e-mail for security purposes, and that if required, verification must be completed prior to processing the request.
- I acknowledge that any wire transfer request executed by Hilltop will be subject to rules and regulations applicable to payment orders, including record keeping and information transmittal requirements under the Federal Bank Secrecy Act and its implementing regulations. I acknowledge and agree that Hilltop may capture and transmit information regarding me (for example, my name, address and account number) and regarding any beneficiary (for example, the beneficiary's name, address, account number, and other beneficiary identifiers) as part of the processing of a payment order. I agree to assist Hilltop in connection with any requirements imposed on Hilltop in fulfilling its obligations in this regard.
- I understand that Hilltop will comply with regulations issued by the US Treasury’s Office of Foreign Assets Control (OFAC). I understand that if any wire transfer request is to an entity listed on OFAC’s list of Specially Designated Nationals and Blocked Persons, Hilltop is prohibited by law from completing the transfer and shall “block” the funds until such time OFAC issues a written release to Hilltop.
- I agree to notify Hilltop immediately if I notice any discrepancy involving the posting of my payment order or if I discover a problem with the transfer. I will provide such notification in writing, including a statement of the relevant facts, within a reasonable time.
- I agree that Hilltop is not liable for consequential, special, or exemplary damages or losses of any kind in relation to this transfer request.