



MERIDIAN SECURITIES, INC.
SETTLEMENTS DEPARTMENT
 2707 B&C PSE Centre, East Tower
 Exchange Rd., Ortigas Center, Pasig City
 Tel No. : (632) 6346931-34
 (632) 6356261-64
 Fax No. : (632) 6346937

Date: _____

REQUEST FOR FUNDS WITHDRAWAL

Gentlemen:

I/ We would like to request for withdrawal of funds from my/our online account with Meridian Securities, Inc. (MSI), more specified hereunder:

Amount	
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OR

Please Deposit to the following Bank Details:

Bank Information	
Name of Bank and Branch	
Account No.	
Account Name	
Swift/ Route No.	

PLEASE FILL UP THIS PORTION IF TO BE **PICKED UP BY REPRESENTATIVE**

I/ We hereby authorize my/our representative whose printed name and specimen signature appear below, to receive the check in my/our behalf.

Representative's Signature over Printed Name

Thank you

Very truly yours,

**Customer's Signature
 Over Printed Name**

**Customer's Signature
 over Printed Name**

<p>Note: Please bring (2) valid identification documents from both the customer/s' and his/their representative, if any, to be presented to the cashier upon release of the check/s.</p>
