E1 ASSET MANAGEMENT FOCUSED ON YOU

Wire Transfer Request Form **Fax #: 877-873-9656**

Wire Destination: ☐ Domestic (Inside US) ☐ International (Outside US)	**Account #:**

Section A – Customer Information

Customer Name

Joint Name on Account (if applicable)

Contact Phone Number

Purpose of Wire

$ + Fee

Amount of Wire

- Account Closures:
  - Write "**Balance of account less wire fee**" on the amount line.
- If wire is returned, an additional wire fee will be deducted for resubmission of the same wire.
- Wire fee is non-refundable.

Section B – Recipient Information

Beneficiary Name

Beneficiary Account Number

Joint Beneficiary Name (if applicable)

Address

Further Credit/Instructions/Comments

City & State

Section C – Bank Information

Bank / Financial Company Name

ABA or Routing Name (must be 9-digits)

Receiving Bank's Address

Account Number / IBAN Number

Receiving Bank's City & State

SWIFT / BIC Code (if applicable)

Section D – Signatures

I authorize E1 Asset Management to transfer funds, as shown on this wire request form. I am responsible for the accuracy of the above information and notwithstanding knowledge of any inconsistency. I understand that E1 does not conduct wire transfers to 3rd parties. I agree to hold E1 harmless from any loss that occurs if your instructions are incomplete, unclear, or incorrect. If we cannot complete a transfer due to unclear or inaccurate instructions, we will notify you orally or in writing by the end of the next business day. **I understand that E1 Asset Management will not execute wire transfer requests received by mail, email, or fax without a call back confirmation.**

✗ Signature:	Date:
✗ Account Co-Owner Signature:	Date:

BACK OFFICE USE ONLY

Customer Call

Who Verified

General Principal Signature

Date/Sent