



CAPITAL
STREETFX

TRANSFER OF ACCOUNT BALANCE

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Ebene, Republic of Mauritius

+1-949-335-4314
support@capitalstreetfx.com

INTERNAL TRANSFER REQUEST

Please complete, sign, and send this form to your personal Relationship Manager or to support@capitalstreetfx.com.

You can also fax the form to +44-2038088970.

Should you have any questions or require additional information please contact Capital Street Intermarkets Limited. Please note that Capital Street Intermarkets Limited may need additional information to complete the process; in which case, a Capital Street Intermarkets Limited Officer will contact you.

Capital Street Intermarkets
Limited Client Full Name: _____

Account Number: _____ ID/Passport/Company Reg. Number: _____

Residential/Business
Address: _____

Email Address : _____ Telephone: _____

By signing this form, the above Client confirms to transfer:

Amount (in numbers): _____

Amount (in words): _____

Currency: _____

From Capital Street Intermarkets
Limited Account Number: _____

To Capital Street Intermarkets
Limited Account Number: _____

Reason for Transfer
(required): _____

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IMPORTANT NOTES:

Please be advised that Capital Street Intermarkets Limited will only transfer funds between accounts belonging to the same person. Capital Street Intermarkets Limited will not process any transfer to a third party.

All internal transfer requests are processed Monday to Friday between 09:00 and 18:00 G M T (Greenwich Mean Time). Due to necessary security checks no requests will be processed outside of these hours.

Client (Originator) Signature: _____ Date: _____

Client (Recipient) Signature: _____ Date: _____

For Internal use only:	
Processed by Back Office Officer: _____	Signature : _____
Signatures Verified:	
Reason(s) for the transaction: _____	_____
Approved by MLCO : _____	Signature: _____

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