

Instructions: This form serves as a letter of authorization to wire funds from your LPL account to an account at another financial institution with the **same registration** as the LPL account. **LPL will not honor a request to wire funds to a third party or a foreign country.** The minimum wire amount is \$5,000. **This form cannot be used with LPL retirement accounts.** Please note: if this is a standing request, it must be updated annually. Fax the completed form to the Money Desk at (858) 546-1212.

1.	LPL Account Number <input style="width: 95%;" type="text"/>	Rep ID <input style="width: 95%;" type="text"/>
Account Registration <input style="width: 95%;" type="text"/>		

2.	This is your authorization to wire funds from the account specified in Section 1 to:	
Name of Bank or Financial Institution <input style="width: 95%;" type="text"/>		ABA Routing Number (verify with bank before submitting) <input style="width: 95%;" type="text"/>
City and State <input style="width: 95%;" type="text"/>		Title of Bank Account <input style="width: 95%;" type="text"/>
Bank Phone Number <input style="width: 95%;" type="text"/>		Account Number to be Credited <input style="width: 95%;" type="text"/>
For Further Credit to:		
Account Name <input style="width: 95%;" type="text"/>		Account Number <input style="width: 95%;" type="text"/>
<p>If the LPL account is registered to a corporation, please include a copy of the corporate resolution.</p>		

3.	Amount of Wire* <input style="width: 80%;" type="text"/> <small>*\$5,000 minimum</small>	Frequency <input type="radio"/> All Cash Available <input type="radio"/> One-Time <input type="radio"/> Standing Instructions
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4.	Charge the \$25 wire fee to: <input type="radio"/> LPL Financial Advisor <input type="radio"/> Client
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5.	<p>Important notice for Standing Letter of Authorization (LOA): By signing this form we understand that we are giving our LPL financial advisor authorization to wire to the above noted institution from the above referenced account without additional written authority on my/our part. This authorization and indemnity will remain in full force and effect for one calendar year unless revoked by us by written notice addressed and delivered to LPL. Such revocation shall not affect any liability in any way resulting from transactions initiated prior to such revocation. This form expires one year from the signed date. A new form must be executed and resubmitted to LPL on an annual basis. We hereby finally and irrevocably release and discharge you of any claims by us or your legal representatives with reference to the foregoing, including the proceeds of the sale or other disposition thereof.</p>
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6.	Authorization form must be signed by all account holders or authorized corporate officers.	
I/We hereby authorize LPL Financial Corporation (LPL) to wire funds from my/our account as indicated above and to process debit entries and adjustments as needed.		
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Client Signature	Client Name (print)	Date
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Client Signature	Client Name (print)	Date
<p>Validation of Client Signature</p> <p>My customer(s) is/are well known to me, and I validate that the signature(s) on the attached document is/are genuine. I agree for myself and my successors, assigns, heirs, executors, and administrators to at all times indemnify and hold harmless LPL Financial Corporation (LPL) and all LPL staff and third-party providers, acting as Authorized Agents of LPL, from and against any and all claims, losses, liabilities, taxes, damages, actions, charges, and expenses, including attorney fees, resulting from your compliance with this request. LPL reserves the right to verify the authenticity of any signature.</p>		
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LPL Financial Advisor Signature	LPL Financial Advisor Name (print)	Date