



WITHDRAWAL FORM

Account Details

Last Name / Surname: _____

First Name / Forename: _____

Account Login: _____

Sending Currency: _____ (USD only)

Amount: _____

Amount in words: _____

Beneficiary's Name: _____
(This must be same as your account name)

Beneficiary's Bank Name: _____

Address of Beneficiary's Bank: _____

City: _____ State / Province : _____

PIN / Post Code: _____

Bank Account Number: _____

Routing Transit Number: _____ ABA Number: _____

Bank Swift Code: _____ IBAN Number: _____

Signature: _____ Date: _____ / _____ / _____

Please email scanned copy of this form to info@cnsinvest.com

For Connoisseur Investment Limited Office Use only.

Signature Verified: YES / NO _____ Large Payment release authorised: YES / NO _____

Payment Authorised: YES / NO _____ Login Verified: YES / NO _____

Verified by: _____ Authorised by: _____