



133-25 37th Ave., Flushing, NY 11354  
 Tel:1-800-869-8800 Fax:1-718-961-3919  
 Member FINRA/SIPC

## Wire Fund Authorization 汇款授权表格

- Please complete this form for processing wire funds from Firstrade to your financial institution.  
 请填写此表格授权将资金从您的第一理财帐户汇至您的银行帐户。
- The name of the beneficiary must match the name on the Firstrade account.  
 汇款受益人的姓名必须与您第一理财帐户姓名相同。
- For funds going to a mortgage account, please provide your mortgage file number in the notes box.  
 汇款进入贷款帐户时请将贷款档案号码填入备注栏。
- We may contact you to verify information prior to processing the request for security reasons.  
 我们可能会与您连络确认您的汇款要求。

### 1. Firstrade Account Information 第一理财帐户资料

\_\_\_\_\_  
 Firstrade Account Number 第一理财帐户号码

\_\_\_\_\_  
 Firstrade Account Name(s) 第一理财帐户姓名

\_\_\_\_\_  
 Address 住址

\_\_\_\_\_  
 Daytime Telephone Number 日间联络电话

\_\_\_\_\_  
 City, State, Postal Code & Country 城市、州、邮递区号及国家

### 2. Receiving Bank Information 收款银行资料

Wire Amount 汇款金额 \_\_\_\_\_

\_\_\_\_\_  
 Receiving Bank Name 收款银行名称

\_\_\_\_\_  
 City and State 城市、州

\_\_\_\_\_  
 Receiving Bank ABA 收款银行 ABA 号码 (限美国银行, 必须为 9 码)

\_\_\_\_\_  
 SWIFT Code (美国境外银行专用)

\_\_\_\_\_  
 Intermediary Bank or Financial Information 中介银行或机构(若适用)

\_\_\_\_\_  
 Intermediary Bank ABA or Account Number 中介银行 ABA (若适用)

\_\_\_\_\_  
 Beneficiary's Account Number at Bank 收款银行帐户号码

\_\_\_\_\_  
 Beneficiary's Account Name(s) at Bank 收款银行帐户姓名

Notes 备注:

\_\_\_\_\_  
 Account Holder Signature 帐户持有人签名

\_\_\_\_\_  
 Date 日期

\_\_\_\_\_  
 Joint Acct. Holder Signature 共同持有人签名(若适用)

\_\_\_\_\_  
 Date 日期

#### For Office Use Only 限第一理财内部使用

Funds Verified \_\_\_\_\_ Telephone Confirmation: \_\_\_\_\_ Signature Verified: \_\_\_\_\_

Processed by: \_\_\_\_\_ Process Date: \_\_\_\_\_

Approved by: \_\_\_\_\_