Revolve Markets

Withdrawal Request

Personal Details			
Account holder number	er:	Account holder name: Email:	
Phone number:			
Full address:			
Total Amount to be wit	thdrawn: € (Eu	ro)	
Amount in writing: €			
Bank name:	Country:	Branch:	Bank Swift code:
Bank Address:			
Account number / IBA	AN:		
AND/OR			
Please refund my credit ca	ard ending with	(Please enter the last 4	4 digits of your credit card)
Please state if you wish to clos	se your account?	NO Y	E\$
I, the undersigned, hereby according and accurate up to the dat		ny account stateme	ent with Revolve Markets to be
Client`s signature	Full Name		 Date

Please send your request by email to the Company's Back Office Department Email: $\underline{Support@RevolveMarkets.com}$

*Please note that the Company will execute your withdrawal request to the same venue of your initial deposit. If your deposit was made via a credit card, the deposited amount will be credited to your credit card. The remaining amount (i.e. profits/earnings) will be credited to your nominated bank account. If the deposit was made via bank transfer, then the withdraw funds will be sent via bank transfer.

For internal use of the Company

Accepted by: Signature:	Received date:
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