Trade Capital Markets Ltd

Withdrawal Form

Your Information

First Name: _____

Last Name: _____

e-mail address: _____

Country: _____

Withdrawal Information:

ICM Account Number: _____

Withdrawal Amount Requested: _____

Method of Withdrawal (check one): ☐Bank Wire ☐PayPal ☐Credit Card ☐MoneyBookers ☐Liberty Reserve

Bank Information (if applicable)

Bank Name: _____

Bank Location (City, Country): _____

Beneficiary (Your Name): _____

Bank Account Number: _____

SWIFT Code: _____

ABA / Routing (if applicable): _____

Signature_____ Date_____