
Account Information:

User ID: _____ Account Number: _____

Account Title/Account Holder Name(s): _____

Issue Check to: Individual Account Holder Joint Account Holders Joint Account Co-Holder (restriction apply please see notes below)

Requested Amount (\$USD): _____

Delivery Information:

Delivery Options: Regular Mail (Free) 2nd Day (\$15) Overnight (\$25)

Mailing Address: _____

Please verify your mailing address. If this address is different from records, please submit a Change of Address Form. Otherwise, please indicate that this is one time request to be sent to the above address by checking below box.

I (We) authorized Wang Investments and its affiliates to send the requested check to the above mailing address only. I (We) understand that this will not change the mailing address on record.

Daytime Phone Number: _____

Please note:

Overnight delivery cannot be made to a P.O.Box

Signature: By signing this form you acknowledge you have full authority and ownership of the above SogoTrade account.

Please sign and date this form. Fax to 1 (212) 668.1630 or mail to:

**Wang Investments
SogoTrade Division
50 Broad Street, Suite 1288
New York, NY 10004**

Account Holder Signature: _____

Date: _____
(mm/dd/yyyy)

Account Co-Holder Signature: _____

IF APPLICABLE FOR JOINT ACCOUNT HOLDER ONLY

Date: _____
(mm/dd/yyyy)

Please note:

Check withdrawals can only be issued to account holders. If your account is a joint account, by default, checks will be issued to **both** account holders. If you wish that a check be issued to only one of the two joint account holders, it is required that all parties must sign the check request form.

Reminder: Please ensure that all new account documentation (Signature form and photo ID) has been filed with SogoTrade.

Please contact SogoTrade at services@sogotrade.com or 1-646-885-6486 if you have any questions.