		DEQUEST FOR	WITTIND AWAI FD	OM THE CLIENT ACCOUNT
		REQUEST FOR	K WIIHDKAWAL FR	OM THE CLIENT ACCOUNT
DR Nam	e :			DR Code :
Client Na	ame :			Client Code :
				Date :
Type of	client account :	Margin Retails	s, Securitised, Institutional,	Nominees, Others
I hereby	request for withdray	val of Trust	Sundry Shares	Others Crystallized interest from the client's account
	Date	Ref	Amount	Currency: (Please circle which appropriate) MYR / HKD / USD / AUD / SGD / Others (please specify)
				_
	*Stock Code	*Counter	*Quantity	*CDS No & A/C Name to be transferred
company against	y against all actions, all claims, actions, p	, expenses, liabilities, roceedings and/or der	losses, claims, costs and	signing any reasons whatsoever. I agree undertake to indemnify the chargers whatsoever which the company may suffer, incur and/or ght or made against the company (whether by the client(s) or any cion.
	ignature / Client ble to Margin Accoun			
	OFFICE USE			
	e of trust monies : ales proceed	Tick (/) whichever app		Others (please specify)
	·		D. Flacina	(Presse specify)
	Method: Tick (/) w	hichever applicable Others (please s	enecify)	
				or Marris Associat
ror N	on Margin Accou	INT	I	or Margin Account

FOR OFFICE USE	
Source of trust monies: Tick (/) whichever applicable	
Sales proceed Contra gain Dividend	Others (please specify)
Credit Method: Tick (/) whichever applicable	
DCTM ACF Others (please specify)	
For Non Margin Account	For Margin Account
Client Position :	Margin Position Before/After Withdrawal (Capped Equity – Outstanding) Required Maintenance Margin: %
O/S Purchase :	Before : = %
O/S Sales :	
Net Contra loss/(gain) :	After: = %
Sundry/Trust :	
Other :	Approved Limit (RM):
Processed/Verified by:	Approved by:
Name :	Name :
Designation :	Designation :
Date :	Date :
Remarks :	Remarks :
	Outstanding in related account(s): (if applicable) Reduction in BTX Limit: Yes / No