

Wiring Instructions Outgoing From Vantage

Self-Directed Retirement Plans			
	lable PDF form. To complete the form, click in an area c	nd type.	
Account Owner Information (As it	appears on your account application)		
Legal Name:	First, Middle, Last		
Vantage Account #:			
To (Where You Are Sending Your Funds)			
Receiving Bank Name:			
Name on Account/Credit To:			
Bank Address:			
City:	State:	Zip:	
9-Digit Routing #:	Account #:		
Intermediary Bank Information ("Beneficiary's Financial Institution" Please include necess	Optional: Some banks can only receive wires using a ary information, if applicable, for further credit to:)	correspondent bank. They are the subordinate b	ank or
Intermediary Bank Name:			
ABA# or SWIFT Code:			
Bank Addres:			
City:			
Name:			
Account Number:			
Notes			

NOTE: Please allow Vantage two (2) business days to complete your request. Documents received after 2pm will be considered as received the next business day.

Account Owner's Signature:

VantageIRAs.com

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