



Revocation Of Power Of Attorney

Risk Warning: Trading foreign exchange, commodity futures, options, precious metals and other over-the-counter or on-exchange products and Contracts for Difference (CFDs) carries a high level of risk and may not be suitable for all investors. Leverage creates additional risk and loss exposure. Before you decide to trade foreign exchange, carefully consider your investment objectives, experience level, and risk tolerance. You could lose some or all of your initial investment; do not invest money that you cannot afford to lose. Educate yourself on the risks associated with foreign exchange trading, and seek advice from an independent financial or tax Adviser if you have any questions.

Important Risk Disclosure: <https://www.capitalstreetfx.com/en/important-risk-disclosure/>

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REVOCATION OF POWER OF ATTORNEY

This form must be completed by the Capital Street Intermarkets Limited client who no longer wishes to have the designated Power of Attorney trade, manage or have access to his or her account. Please complete, sign and email this form to your personal Relationship Manager or to support@capitalstreetfx.com.

Note: Please make sure that all orders/positions have been closed in your account when submitting this form. Capital Street Intermarkets Limited will not process this form if there are any open trades/positions. Please be advised that Capital Street Intermarkets is not liable for any loss that may occur as a result of trading by the Power of Attorney on your account, and for transparency purposes, recommends that you send a copy of the Revocation of Power of Attorney form to your Money Manager.

► CLIENT'S INFORMATION

Capital Street Intermarkets Limited

Client Name: _____

Capital Street Intermarkets Limited

Account Number: _____

Personal ID Number _____

Address: _____

Email: _____

Tel. No _____

► POWER OF ATTORNEY'S INFORMATION

Full Name/Company Name: _____

Capital Street Intermarkets Limited

Account Number (if applicable): _____

Personal ID Number _____

ID Number: _____

Address: _____

Signature: _____

Date: _____

Email: _____

Tel. No _____

For Office use only

Date in: _____

Checked by : _____

Date processed: _____

Processed by : _____

Account Number: _____

Visa: _____

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