

Account Transfer Form

Transferring FCM (The Firm Currently holding Customer's Account)

Name of FCM _____
Street Address _____

City/State/Zip _____
Name of Introducing Broker _____
Account Number(s) _____

Account Title(s) _____

Important—Date the Account Transfer Form was sent and/or faxed to Transferring FCM: _____
Date

Re: Transferring Customer Account to PFG, Inc.

To the above named Transferring FCM: (Customer check only one of the following paragraphs that apply)

- Please be advised that I wish to transfer all open commodity positions, ledger balances, securities and other properties held by you in the above named account number(s) to the receiving firm.
- Please be advised that I wish to transfer only the following held by you, the transferring FCM, from the above named accounts to the receiving FCM:

If Transferring Cash by Check make payable to **Peregrine Financial Group, Inc. or PFG, Inc.**, Cust. Seg. Acct., Credit to: (Customer Name)

Receiving FCM:
PFG, Inc.
190 S. LaSalle Street
7th Floor
Chicago, IL 60603

X

Customer Signature

Print Name **Date**

X

Customer Signature

Print Name **Date**

(Attach a copy of this page for additional signatures.)