

Cancel Withdrawal Request

Date: _____

To: Colmex Pro Ltd
Attention: Back Office Department

From:

User name _____

Account Holder Name _____

Phone Number _____

Email _____

I, [full name] _____, hereby request to cancel the withdrawal request I have placed on the [date] _____, for the amount of _____ US dollars, from my account [user name] _____ at Colmex Pro Ltd.

Client`s signature

Full name

Date

Please send your request by fax or email to the company`s Back Office as detailed below:

Email: Backoffice@colmexpro.com

Fax: + (357) 25 030037

For internal use of the company

Accepted by:

Received date:

Signature: