

CONFIRMATION FOR ORDER CANCELLATION IN MARGINAL ACCOUNTS NO. _____

Rīga

_____ 20____

The Client

CIF code, name, Registration number / name, surname, identity number (if no identity number exists – date of birth)

Date: day: _____ month: _____ year: _____

Please cancel the operation of order No. _____ of _____ 20____.

Client's signature

Client

I have become acquainted with Bank's General Provisions for Transactions, agree with them and recognize their binding effect on myself (representative).

S.S.

(name, surname, signature)