

Date _____

BA SECURITIES, INC.
SETTLEMENTS DEPARTMENT
Suite 401-403 CLMC Building 259-269 EDSA,
Greenhills Mandaluyong City, Metro Manila
Tel No. :(632) 727-5374
Fax No.:(632) 722-0132

AUTHORIZATION TO PICK-UP CHECK

Gentlemen:

This is authorize my/our representative, whose printed name and specimen signature appear below, to pick- up check in my/our behalf.

Thank you.

Very truly yours,

**Customer's Signature
over Printed Name**

**Customer's Signature
over Printed Name**

**Authorize Representative's Signature
over Printed Name**

Notes: Bring (2) Valid identification documents shall be required from both the customer/s and his representative, if any, to be presented to the Cashier upon release of the certificate/s.