

**Diametric Partners, LP**

**WITHDRAWAL REQUEST FORM**

To: Diametric Partners, LP  
c/o [Theorem]  
Facsimile: [number]  
Email: [email]

Dear Sir or Madam:

Date: \_\_\_\_\_

The undersigned limited partner (the “**Investor**”) in Diametric Partners, LP (the “**Fund**”) hereby requests that the Fund withdraw from the capital account(s) maintained on its behalf (other than the portion of such capital account(s) allocated to special investment accounts, if applicable) (collectively, the “**Capital Account**”) and pay the following amount to the Investor as directed below:

*(please initial one of the following/insert appropriate information)*

\_\_\_\_\_ the entire balance of the Class \_\_\_\_ Capital Account(s) *(a complete withdrawal)*

\_\_\_\_\_ \$ \_\_\_\_\_ *(a partial withdrawal)*

on \_\_\_\_\_ (the “**Withdrawal Date**”). The Investor acknowledges and agrees that this withdrawal request is subject to all of the terms and conditions set forth in the Limited Partnership Agreement of the Fund (as the same may be amended from time to time, the “**Partnership Agreement**”).

Please identify the bank or other financial institution (and corresponding wire information) to which the withdrawal proceeds should be sent by wire transfer. Withdrawal wires must be sent to a bank account held in the name of the Investor as it is registered with this investment. Withdrawal to third-parties will not be completed. The Investor agrees that all or any funds payable to the Investor may be wire transferred in accordance with the following instructions, until further written notice, signed by one or more of the individuals authorized to act on behalf of the Investor, is sent to the Administrator. With respect to this transaction and future transactions, if for any reason the bank account information on file and the bank account information below do not match, or if the bank account name does not match the Investor name for valid reasons, the Administrator may require that the Investor provide additional information.

Bank Name	
Bank Address	
Bank Country	
ABA or SWIFT Code	
Intermediary Bank Name (if applicable)	
Intermediary Bank SWIFT Code	
Intermediary Bank ABA	
Account Name	
Account Number	
For Further Credit To: Name (if applicable)	

For Further Credit To: A/C Number	
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Very truly yours,

\_\_\_\_\_  
Signature of Investor

\_\_\_\_\_  
(Print name)

**NOTE:** Should another authorized signer, other than the original subscription document signer(s), provide instruction regarding the investment, provision of identification and signature verification (in the form of government-issued photo identification) for said individual(s) will be required if it has not already been provided as part of the identity verification documentation requirements set forth in the Anti-Money Laundering Supplement.