

WIRE	TRANSFER	REQUEST	Form
------	----------	---------	------

To ensure accuracy, this form must be typed.

Date of Wire	Amount of Wire	Time of Request	
Email to <u>wires@tander</u>	m.bank for processing		
Wire Fee: Domestic - Originator Informa	\$20.00; International - \$40.00 TION		
Client Name			
Address, City, ST, Zip			
Account Number			
Comments			
INTERMEDIARY BANK IN	IFORMATION (IF NECESSARY)		
Intermediary ABA Nun	nber		
Intermediary Bank Na	me		
BANK INFORMATION			
ABA Number:	S	WIFT Code:	
Bank Name:			
Address:		City	
ST/Province	Country	Postal Code	
BENEFICIARY INFORMA	ATION		
Full Name:			
Address:		City	
State/Province	Country	Postal Code	
Email:			
Account Number:			
Special Instructions:			
and agree that such trai currency wire transfer, I	nsfer of funds is subject to the Tandem Ba	uctions noted herein (including debiting my account, if applicable) nk's transfer agreement and applicable fees. If this is a foreign conversion rate at the time the wire transfer is sent. I understand r international wires.	
Customer Signature		Date	
Second Signature (if required)			
BANK USE ONLY			
		Employee Initials:	
Approval Signature		Current Balance:	
CUSTOMER VERIFIED BY:			
	ntact:		
In person or Phone Nu	mber:	Date & Time:	
WIRE DEPARTMENT ONLY			
FF	RB balance:	Wire #	
	Entered By:	Time:	
,	Verified Bv <sup>.</sup>	Time	