

WIRE FUNDS REQUEST

Wire Amount (exact amounts only):		Request Date:	
G A WPGO A ANA		NAME OF THE PARTY	
Customer WDCO Account Name:		Customer WDCO Account Number:	
Customer Bank Account Name:		Customer Bank Account Number:	
Castomer Bailt (1000ailt France)		Castomer Bank 11000ant 1 tank	
Recipient Bank Name:		Bank ABA / SWIFT / IBAN / CLABE Code:	
For further credit (if applicable):			
Beneficiary Bank Name:		Bank ABA / SWIFT / IBAN / CLABE Code:	
Beneficiary Bank Telephone Number:	Beneficiary Bank Account Number (if any):		
CUSTOMER SIGNATURE			
JOINT ACCOUNT CUSTOMER SIGNATURE			
Registered Representative Signature:	Registered Represer	ntative Name:	Date:
Verbal Verification Obtained by Speaking with:		Date of Verbal Verification	
verbal verification Obtained by Speaking with.		Date of Verbai Verification	
Foreign wire			
Confirmation the above information is consistent with the attached outstanding Customer Wire Instructions.			
(back-office initials)	noiseen with the actual	ned culturaling cuttomer who	nisu de crons.
For foreign account wire transfers only: For wires in excess of \$25,000:			
AML Principal Review:	Principal Review:		
The particular terrent			
James C. Snow	Lyle V	e W. Davis	
(signature date) (sign		ture date)	