

Group Name: (No group Selected)

Bank / Cust Trace	Template Code / Name	Orig. Account / Bene. Account	Orig. Amount / Bene. Amount	Purpose	Send Date	Remaining Appr
2021292000265009528	FEE SLS IL FEE SLS IL	9854924019 (USD) 4971263 (USD)	993.00 993.00		10/19/2021	1

Total Count 1 Total Debit Amount: 993.00 (USD)

Close

In order to submit a Money Transfer request on the account numbers described above, approval is required. Please press the print button on your browser to generate a hard copy of this wire transfer request.

This transaction is subject to bank rules and regulations governing such electronic transactions as described in our services agreement. Please keep these numbers handy in case you have any questions regarding this transaction. If any portion of the above is incorrect, or you have further questions, please [contact customer service](#). Thank You.