

Sweep Deadline (circle one)

# PB Funds Transfer Form/Input Guide

11:30	1:30	4:30	N/A	EST
8:30	10:30	1:30	N/A	PST



Today's Date <b>11/12/2009</b>	Time <b>9:51 AM</b>	Execution Date <b>11/12/2009</b>	Amount <b>\$168,148.09</b>
Debit Account Number:		Debit Account Title: <b>GHISLAINE MAXWELL</b>	

Debit Account Type			
DDA <input type="checkbox"/>	Cusotody Principal <input type="checkbox"/>	Custody Income <input type="checkbox"/>	
MMIA <input checked="" type="checkbox"/>	Trust Principal <input type="checkbox"/>	Trust Income <input type="checkbox"/>	
JPM Funds <input type="checkbox"/>	Advisory Principal <input type="checkbox"/>	Advisory Income <input type="checkbox"/>	
	Asset Allocation(PAAS) <input type="checkbox"/>	Offshore Fund <input type="checkbox"/>	

Payment Information (Select One)

**1.) Internal Transfer (Related- Non-Related)**

Credit Account Number:	Principal** <input checked="" type="checkbox"/>	**Check Sweep Deadline
Account Title: <b>GHISLAINE MAXWELL</b>	Income <input type="checkbox"/>	

**2.) Money Transfer**

Wire       Book       FX

Payee Bank ABA: \_\_\_\_\_ Interbank ABA: \_\_\_\_\_

Payee Bank Name: \_\_\_\_\_ Interbank Name: \_\_\_\_\_

For Account Number: \_\_\_\_\_

For Account Name: \_\_\_\_\_

**3.) Treasurer's Check/FX Draft**

Print Check In:  NY     DE

Payee Name: \_\_\_\_\_

Payee Address: \_\_\_\_\_

For Account Of: \_\_\_\_\_

Reference/Advice Description/Comments:

To cover trade activity

< \$25K does not require a callback >  
 < or - \$25K requires a callback >

Payment Instructions Originator	Method of Communication (If Not Morgan Initiated)		
Morgan Initiated <input checked="" type="checkbox"/>	Written Request <input type="checkbox"/>	Telephone Request <input type="checkbox"/>	
Client Initiated <input type="checkbox"/>	Fax Request <input type="checkbox"/>	Email Request** <input type="checkbox"/>	**Callbacks <b>must</b> still be done

Initiator's Name & Ext Stamp <b>Bill Doherty</b>	Initiator's Signature 
Authorizer's Name & Ext Stamp	Authorizer's Signature
Client/Caller Name: _____	
Client Telephone: _____	
Call Back Name: <b>Bill Doherty</b>	
Call Back Signature: _____	Ext: <b>4-3954</b>
Call Back Date: _____	Time: _____
CMS/Global Hold Approval: Obtained: <input type="checkbox"/> N/A <input type="checkbox"/>	
DDA Overdraft Approval: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	

11/12/2009 11:23:00 AM DATE: 11/12/2009 03:32:00 PM DID: 8887316607 CSID: Page 1 of 1