## SECTION A – WIRE FROM

| DATE RECEIVED | TIME RECEIVED | AMOUNT **$6,690.00** USD_**X**_ or FX _____ |
|---|---|---|

**Rotary Club of Pocatello (by Darl R. Bennett – Executive Secretary)**

CUSTOMER/ORIGINATOR NAME

| **31015514** | Memo | **TAXPAYER ID** **826024339** |
|---|---|---|
| | Posted by: ** | OR SSAN |

ACCOUNT NUMBER CHARGED
OR     Cash

| **Rotary Club of Pocatello, P.O. Box 488** | **Pocatello** | **ID** | **83204** |
|---|---|---|---|
| ORIGINATOR ADDRESS | CITY | STATE | ZIP |

WIRE INSTRUCTION RECEIVED BY:    Bank Employee Initials completing call back: _____
___ PERSON ___ PHONE (REQUIRES PRE AUTHORIZED WRITTEN AGREEMENT ON FILE)
___ MAIL    ___ FAX (customer call back name & time) _____

CHECK IF FOREIGN   **X**
WIRE

## SECTION B – WIRE TO

**Rotary Club of Maluba**
   **Nyampande Orphanage Medical Clinic Project**

BENEFICIARY NAME

| Rotary Clubs do not have physical addresses. This club's meetings are held at **Best Western Plus Lusaka Grand Center** **8018A Great East Road (Opp. ZESCO hq.)** **Lusaka, Zambia**    see also https://www.facebook.com/rotary.maluba/ | CITY | STATE | ZIP |
|---|---|---|---|
| BENEFICIARY ADDRESS | | | |

**Stanbic Bank**

BENEFICIARY BANK

| **1209 Addis Ababa Dr, Lusaka, Zambia** | CITY | STATE | ZIP |
|---|---|---|---|
| BENEFICIARY'S BANK ADDRESS/Routing Code for International payments | | | |

| **9130001972425** | **Branch Code: 040002** **SWIFT: SBICZMLX** | |
|---|---|---|
| BENEFICIARY'S ACCT NUMBER/Iban for Europe/Clabe for Mexico | BENEFICIARY ABA / ROUTING NUMBER **for US payments/SWIFT Code for foreign payment**s | |

SPECIAL INSTRUCTIONS:

Purpose: Charitable Donation
Repair Medical Clinic Roof so the clinic can be re-authorized to provide medical services

## SECTION C – FEE & AUTHORIZATIONS

| CUSTOMER SIGNATURE *Darl R. Bennett* | FEE AMOUNT    $ **25.00** |
|---|---|
| FORM PREPARED BY (EMPLOYEE)   AND  TITLE / POSITION | OFFICER APPROVAL (IF APPLICABLE) |

## BOOKKEEPING USE ONLY

| | | | INTERNATIONAL WIRE CONFIM #      OFAC PERFORMED BY: |
|---|---|---|---|
| ENTERED BY: | VERIFIED BY: | TIME VERIFIED: | |