

Brooke Hague Trotter

Attorney at Law

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WIRE REQUEST AUTHORIZATION

All names on Account: _____

(must match exactly what is on file with your bank)

Account Holder Address: _____

(PHYSICAL ADDRESS, NO PO BOX)

(must match what is on file with your bank) _____

Account No.: _____

Bank Routing No. (ABA No.): _____

NOTE: Banks sometimes have different routing numbers for wiring vs. checking accounts, please verify with your bank)

Bank Name: _____

Bank Address and phone number: _____

For Further Credit to (If applicable): _____

I/We are responsible for the accuracy of these wire instructions and hereby certify they are correct. Brooke Hague Trotter, Attorney At Law, LLC (or the closing attorney) may rely solely on these instructions and has no duty to determine whether the Account Name, Account Number, Bank Name or ABA/Routing Number properly correspond to the intended person, bank or account.

I/We agree that Brooke Hague Trotter, Attorney At Law, LLC (or the closing attorney) shall have no obligation to replace misdirected funds if sent in accordance with these instructions. I/We agree to indemnify and hold Brooke Hague Trotter, Attorney At Law, LLC (or the closing attorney) harmless from and against any loss or liability, including attorney's fees, that may be incurred as a result of reliance on these instructions.

I/We agree that Brooke Hague Trotter, Attorney At Law, LLC (or the closing attorney) may for any reason decline this request to transfer funds by wire transfer and instead issue a Vermont attorney IOLTA account check.

By signing below, I/we acknowledge that there is an approximate \$50 outgoing wire fee that I/we will incur. This fee is subject to change.

Name of Requestor (Print) Signature Date

Name of Requestor (Print) Signature Date

VERBALLY VERIFIED BY:

Print Name: _____ Date