

CB\$ TEMPLATE FORM
TO FUND THE INTERNATIONAL WIRE OUT ACCOUNT
(To establish a template for a repetitive wire transfer via CB\$)

<u>To:</u> NC Dept. of State Treasurer Banking Operations E-mail: dst.disbursing@nctreasurer.gov	<u>From:</u> Agency Name: _____ Address: _____ _____	<u>Date:</u> _____
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This form contains sensitive financial information that should not be emailed without being encrypted. If your system does not support email encryption, it is advisable that you contact dst.disbursing@nctreasurer.gov for potential options to deliver the information in a secure format.

Type of Request: (Select one)	
Add: ☐	
Delete: ☐	If Delete, Template #: _____
Change: ☐	If Change, Template #: _____
Type of Payment: (Confirm) ☐ FT39-Other : To fund International wire out account	
Debit Information:	
Account Name: _____	
Disbursing/STIF Account #: _____	
Payment Instructions:	
Payee Bank Name: Wells Fargo Bank, N.A.	
Address: 420 Montgomery St	
San Francisco, CA 94104	
ABA: 121000248	
Beneficiary Name: NC Dept of State Treasurer	
Account #: xxxxx 2688	
Payment Details: <u>To fund the International wire out account</u>	
Request Submitted By:	
Agency Name: _____	
CB\$ Customer ID : _____ (AAANNNN)	
Phone Number: _____	
I certify that the information provided in this form is true and correct. Also, I certify that I am authorized to transact business on behalf of the agency on the accounts listed above. Electronic signatures will not be accepted.	
Signature: _____ (Must be on signature card)	
Print Name: _____	
Print Title: _____	

NC Dept. of State Treasurer Use Only:	
Template # Assigned: _____	Template Setup/Modified on CB\$: _____
Signature Card Verified: _____	Template Setup/Modified on Wells Fargo: _____
Completed by: _____	Date: _____
Approved by: _____	Date: _____
Original Template Opened Date: _____	