



1300 North State Street
 Bellingham, WA 98225
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Wire Transfer Request Form

I authorize Saturna Capital and/or Saturna Brokerage Services to wire transfer funds from my Saturna account listed below (left column) to the Receiving account listed below (right column). I agree to pay the fee applicable for the type of transfer initiated which will be charged to my account from which the funds are transferred.

Saturna Account Number:

□ □ □ □ □ - □ □ - □ □

Clearing Firm Account Number (if applicable):

Saturna Capital Account Name:

Joint Owner's Name (if applicable):

Saturna Capital Account Address:

City State Zip

Country

Daytime Telephone:

(□ □ □) □ □ □ - □ □ □ □

Amount of Wire (\$5,000 Minimum per fund):

\$ _____

3rd Party Transaction? Yes No

For International Wires, provide the purpose of the wire:

SR

Additional details:

Wire Fee: \$25 Domestic U.S.

International: \$35 (Mutual Funds)

\$40 (Brokerage)

Primary Account Holder's Signature

Date

Joint Account Holder's Signature

Date

Responsible Rep: _____ Phone #: _____
 Date Requested: _____ Branch Prefix: _____
 Approved By: _____

Receiving Bank's Name (Domestic Banks):

Receiving Bank's Address:

City State Zip

Country

Receiving Bank's ABA Routing Number

□ □ □ □ □ □ □ □ □ □

Account Number:

International Bank Name (International Wires):

International Bank's Address:

City Country

Receiving Bank's S.W.I.F.T. Code (International Wires):

Further Credit To (International Wires):

Recipient's Account Number:

Recipient's Account Name at Receiving Bank:

Joint Owner's Name (if applicable):

Recipient's Address:

City State Zip

Country

SR