

Print Form – Service Request

Ticket # [REDACTED] **Initiated Date** 05/06/2009 4:00PM
Request Category Fees **Priority** NORMAL
Request Type Fee Schedule Change/Waiver **LOB** PB
Request Sub-Type Custody

Account Title JEFFREY EPSTEIN **Account #** [REDACTED]
Sweep Fund Name JP MORGAN INSTITUTIONAL TAX F **Account Type** INDIVIDUAL
Money Manager

ECI # [REDACTED] **Phase 3 Account #**
Decision Maker [REDACTED] **MasterTrust (Y/ N)** N
Client Name JEFFREY E EPSTEIN
Relationship Name
Region
Market
Cost Center CHBG

Initiator Name JANET E YOUNG
Approver Name
Initiating Team CSG CHBG (DE) 4

Status InProgress **Stage** Complete Request
Processing Team PB FEE BILLING **Error Control Number**
Reason BAU - Business as Usual **Complexity** LOW
Resolution Maintenance **# Accounts**
Stage Date 05/12/2009 11:33AM **# Clients**
Date/Time Resolved 05/12/2009 11:33AM **# Transactions**
Resolved By YOLANDA A DAVIDSON **# Tax Lots**
Current Owner JANET E YOUNG
Current Team CSG CHBG (DE) 4
Estimated Resolution Date 05/12/2009

SCAN
SPN # _____
ACCT # _____
Doc ID # _____
Effective Date: _____