

Parkhe, Akanksha N

From:

To:

Cc:

Subject:

Attachments:

Request Completed..

Special Services NY

PB-Service1318

Pegoraro, Gina M

██████████ --03192013--344--COMPLETED / IMPORT REQUEST----RTB

██████████.pdf

Fsd

Thanks & Regards,

Kailash Joshi | Private Bank| J.P. Morgan | Address: Prism Towers, Link
Road, Mind space, Goregaon (West), Mumbai 400 064|

T: ██████████ | ██████████

For escalations or requests requiring immediate attention please contact:

| Martha Fernandes ██████████, ██████████ (Mobile) |

| Kavita D Das + ██████████ |

| Sachin Dua + ██████████ |

| Shekhar Jain ██████████, ██████████ |(Mobile) |

"JPMC Internal Use Only"

From: ██████████

[mailto:██████████]

Sent: Monday, March 18, 2013 1:46 PM

To: Deposit Concessions; Special Services NY; STREAM Business Analysts

Subject: The following newly opened account includes Checkbook Request
Checkbook Request

Folder Name: PLAN D LLC- DDA

Product: DDA/MMIA

Account Title: PLAN D LLC

Account Number: ██████████

1

Client Service: CHBG (DE) 4 (0J1)
Initiator :GINA M PEGORARO
Booking Bank: New York & Northeast
Banker: NELSON D JUSTIN (GREENWICH / 002753)
Account Type: JPM Classic Business Checking (Low-Fee)
Account Legal Address:
6100 RED HOOK QUARTER B3
ST THOMAS, VIRGIN ISLANDS 00802
UNITED STATES
Information from Checks Panel:
Type of Checks: Newport Desk Book
Omit My Address from Check Imprint
Alternate Check Delivery Address:
Billing information: First Order, no charge
Information from Check Details Panel:
Check Style:
Check Color:
Order Deposit Slips : No
Special Instructions: ATTN: RICHARD KAHN
Information from the Computer Check Details:
Accounting Software:
Software Version:
Product Code:
2

Page: 1 Document Name: untitled

MEC010A-03

ABA# [REDACTED] ACCT# [REDACTED]

ORDERED BY KAILASH JOSHI

PROGRAM _____

START# 00000101

STYLE NPT

DESIGN DB

OF BOXES 01 OR QTY 000300 _____

ACCENTS _____

LETTERING _____

COVER CMB _____

CVR MONOGRAM _____

1 SIG LINE+ _____ ADD'L SIG LINES _____

CUSTOM MESSAGE _____

TITLES OVER SIG: _____

BUSINESS PRODUCTS ONLY:

COLOR _____ COPIES _____ VOUCHER# _____

BILLING: PAID BY 1

REPRINT REASON _____

SHIPPING: DESTINATION 2 METHOD C

F7-PERSONAL

F8-COPY

F3-RETURN

F9-MODIFY

CHARGE TO 1

PRESS ENTER TO VIEW ADDITIONAL PRODUCTS

F1-HELP

ORDER# 7162105248

STATUS CONFIRMED

ORDERED 03/19/2013

14:59:51

SHIPPED

TOTAL

F6-DELETE

F10-PAYROLL F11-SHIPPING F12-LOGOFF

CHECKS

14:59:53

BRANCH# 816

PERSONALIZATION:

PLAN D LLC

03/19/2013

DEPT# _____

PHONE 1-[REDACTED] USERID FCHA044

PROMOTION _____

FORMAT 05

Date: 3/19/2013 Time: 3:59:59 PM

Page: 2 Document Name: untitled

MEC040A-01

ABA# [REDACTED] ACCT# [REDACTED]

ORDERED BY KAILASH JOSHI

SHIPPING: DESTINATION 2 METHOD C

SHIPPING ADDRESS:

NAME FIRST

MIDDLE

LAST

S.DIMMLER/RTB FOR PLAN

NEW YORK

BUSINESS NAME J.P.MORGAN SPECIAL SERVICES NY

ATTN LINE

ADDRESS LINE1 270 PARK AVE FL 30 (NY1-K600)

ADDRESS LINE2 _____

CITY

STATE/PROVINCE NY

ZIP/POSTAL CODE 100172014

COUNTRY

SHIPPING

14:59:57

BRANCH# 816

CHARGE TO 1

03/19/2013

DEPT#

PHONE 1-[REDACTED] USERID FCHA044

F1-HELP

F3-RETURN

F12-LOGOFF

Date: 3/19/2013 Time: 3:59:59 PM