1First Bank

Transfer Application

BRANCH NO.	PREFIX	TEST KEY		DATE	TIME

TRANSFER TYPE:

☒ WIRE	☐ CABLE	☐ DRAFT	☐ Mail to Customer	☐ Mail to Payee	☐ Send to Branch

REP SIGNATURES *(Complete appropriate boxes)*:

KEY	MODIFY	MODIFY	APPROVE

IF TRANSFERRING FOREIGN CURRENCY:

CONTRACT NO	VALUE DATE	CONVERSION RATE	CONVERTED BY *(Initials)*

TRANSFER AMOUNT:

FOREIGN CURRENCY (TYPE AND AMOUNT)	TRADER'S NAME		
		U.S. DOLLARS	$ 71,012.00

NOTE:
- Foreign currency amount multiplied by the exchange rate = U.S. dollar Amount.
- U.S. Dollar amount divided by the exchange rate = Foreign Currency Amount.

ADDITIONAL FEES	$
TOTAL AMOUNT	$ **71,012.00**

METHOD OF PAYMENT:		**INTERMEDIARY CORRESPONDENT BANK:** *(If necessary)*
DEBIT ACCOUNT NO. ▇▇▇▇	DEBIT BRANCH/DEPT. NO. 06	ABA ROUTING NO./SWIFT CODE
NAME/ACCOUNT TITLE LSJ, LLC		BANK NAME
MAILING ADDRESS: c/o Financial Trust Co., Inc. 6100 Red Hook Quarter, B3		ADDRESS
PHYSICAL ADDRESS: 6100 Red Hook Quarter, B3		
CITY, STATE, ZIP CODE, COUNTRY St. Thomas, VI 00802-1348, USA		CITY, STATE, ZIP CODE, COUNTRY

TO: PAYEE/BENEFICIARY'S BANK	**FOR: PAYEE/ACCOUNT OF ULTIMATE BENEFICIARY**
BANK CODE ▇▇▇▇	ACCOUNT NO. ▇▇▇▇
BANK NAME Darby Bank & Trust	NAME/ACCOUNT TITLE TSG Technologies, Inc.
ADDRESS	ADDRESS 327 Eisenhower Dr. Ste. 100
CITY, STATE, ZIP CODE, COUNTRY Savannah, GA, 31406, USA	CITY, STATE, ZIP CODE, COUNTRY Savannah, GA, 31406, USA
ORIGINATOR REFERENCE:	**BENEFICIARY REFERENCE:**

SPECIAL INSTRUCTIONS: *(Optional)*

Please email Fed. Reference number to Emad Hanna at ▇▇▇▇

THE UNDERSIGNED AGREES TO THE CONDITIONS ON THE REVERSE SIDE OF THIS APPLICATION.

CUSTOMER'S TELEPHONE NO. ▇▇▇▇	DATE OF APPLICATION 6/27/2007
CUSTOMER'S SIGNATURE *(signed)*	CUSTOMER'S SIGNATURE *(If Applicable)*

CUSTOMER'S TRANSFER REQUEST: *(Complete appropriate boxes)*

☐ FAX	☐ IN PERSON	☐ PHONE	☐ MAIL/MESSENGER	I.D. USED *(Do not leave blank)*	☐ TELEPHONE/FAX AGREEMENT ON FILE
☐ CALL-BACK IF OVER $ LIMIT:					☐ ONE TIME ONLY TRANSACTION
☐ By _____	Spoke to _____	☐ Time _____			☐ HOLD PLACED

TAKEN IN BY *(Print Name)*		INITIALS	TEST KEY CALCULATED BY *(If different than taken in by)*	INITIALS

BRANCH AUTHORIZED SIGNER *(Print Name)*	BRANCH TELEPHONE NO. ( ) -	BRANCH AUTHORIZED SIGNATURE

NNNN-2196-0802