

### REQUEST FOR DISBURSEMENT OF REGISTRY FUNDS BY WIRE TRANSFER

*(Account name must be exactly as stated in the Court's Order. All payees must be listed on and sign this form.)*

CAUSE NO. \_\_\_\_\_

I/We (print name(s)), \_\_\_\_\_

request that the funds I am/we are to receive from the Court Registry be transferred by wire to my/our bank

ABA Number (9 digit checking or saving account wire ABA number): \_\_\_\_\_

Account Number: \_\_\_\_\_

Name on Account: \_\_\_\_\_

I/We understand that I am/we are liable for any Incoming Wire Transfer fee my/our bank may charge.

\_\_\_\_\_  
Applicant Signature (As on Court Order and styling of bank account)

\_\_\_\_\_  
Applicant Signature (As on Court Order and styling of bank account)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature (As on Court Order and styling of bank account)

\_\_\_\_\_  
Applicant Signature (As on Court Order and styling of bank account)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

#### NOTARY

*(This section is required only if form is being submitted by mail without a copy of each applicant's driver's license or social security card)*

THE STATE OF \_\_\_\_\_ §

COUNTY OF \_\_\_\_\_ §

Before me, \_\_\_\_\_, a notary public, on this day personally appeared \_\_\_\_\_  
(Notary Public's Name) (Applicant(s) listed above)

\_\_\_\_\_, known to me (or proved to me on the  
(Applicant(s) listed above)

oath of \_\_\_\_\_) to be the person(s) whose name(s) is/are subscribed to the foregoing instrument

and acknowledged to me that he/she/they executed the same for the purpose and consideration therein expressed. Given under my

hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS (PRINT NAME)

MY COMMISSION EXPIRES \_\_\_\_\_

#### County and District Clerk / County Auditor Use Only

Approximate Amount: \_\_\_\_\_  
*(Actual amount transferred from Registry may differ by interest earned from approval date to transfer date)*

**APPROVED:**

\_\_\_\_\_  
County or District Clerk Date

\_\_\_\_\_  
County Auditor Date