

CASE NO. 10-CR-1031 (A)-AHM
UNITED STATES OF AMERICA

ENRIQUE AGUILAR, ET AL
VS. 647

PLAINTIFF'S EXHIBIT _____

DATE _____ IDEN.

DATE _____ EVID.

BY _____
DEPUTY CLERK

JUN-3-2004 13:57 DE :

314 P.2

To
Dresdner Bank Lateinamerika Aktiengesellschaft
Formerly Deutsch Südamerikanische Bank AG

PAYMENT ORDER

Hamburg DRESDEHS Geneva DRES733M Panama DRES7APA Grand Cayman DRESKVKX
BLZ 20040100

Payment to the debit <input type="checkbox"/> Euro Account <input checked="" type="checkbox"/> US\$ Account <input type="checkbox"/> Foreign Currency - Account <input type="checkbox"/> Other		Bank use only: Sent to DISPO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> no <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
32 Currency: USD Amount in figures: 5,000 Account to which: 04.00.04 Reference: FIVE THOUSAND DOLLARS		33 A. Value Date: 04.06.04 Final DISPO released by & date released: Standard GLOBUS Local GLOBUS	
50 By order of: SORVILL INTERNATIONAL S.A. Residential Address of Ordering Party: Street, Place, country)		Account No.: 582-256 00/400	
57 Beneficiary Bank (Name, Bank code, SWIFT Address, ABA Number): BANKER'S BANK MADISON, WISCONSIN ABA ROUTING NUMBER: 075912479 CREDIT: TOWN BANK ACCOUNT NUMBER: 178434			
Address of the Beneficiary Bank: (street, Place, country)			
59 Beneficiary: ST. JOHN'S NORTHWESTERN MILITARY ACADEMY		Account No.: 105124	
Residential Address of Beneficiary: (Street, place, country)			
70 Purpose/Payment details: CADET: NESTOR ARTURO MORENO VALDEZ			
Additional instructions for the Bank (DBLA): ATTN: MR. BJOERN WINGSCH		VAL S/N: FR REF. S: TRANSFERENCIA	
71 Charges/fees: Charge your fees & charges to Charge 3 rd party fees & charges to		<input type="checkbox"/> account <input type="checkbox"/> beneficiary <input type="checkbox"/> account <input type="checkbox"/> beneficiary	
Without special instructions your charges/fees are to be borne by the ordering party			
Remittance advice: <input type="checkbox"/> by SWIFT to Beneficiary Bank <input type="checkbox"/> By telephone to Beneficiary <input type="checkbox"/> By telex/tel to Beneficiary <input type="checkbox"/> Payment against Presentation of ID Documents			
Place & date signed: JUNE 03, 04		Signature(s): <i>[Signature]</i>	
Bank use only Correspondent bank:			
Intermediary bank:			
Cover through			
Input		Verified	
Released by & Time released:			

*Test check letter
i. O. [Signature]*

Once Fax reverse i.d.

Confidential pursuant to Section 24(d)

Wingsch
3034

