

Provide these instructions to individuals wishing to initiate a wire transfer into a deposit account at SSB Community Bank. Please fill out each field completely to ensure proper credit and guard against possible return of funds.

RECEIVER BANK:

Receiver Bank Name: Bankers' Bank

Receiver Bank ABA: 075912479

BENEFICIARY BANK:

Full 9-Digit Beneficiary Bank ABA: 241271795

Beneficiary Bank Name: SSB Community Bank

Beneficiary Bank Street Address: 152 N. Wooster Avenue | P.O. Box 107

Beneficiary Bank City: Strasburg

Beneficiary Bank State, Zip Code: OH, 44680

BENEFICIARY:

Final Customer Account Number: _____

Final Customer Name: _____

Final Customer Street Address: _____

Final Customer City: _____

Final Customer State, Zip Code: _____

Further Instructions: _____