

**SBERA WIRE TRANSFER PAYMENT FORM**

Wire Instructions	Employer Information	
<b>State Street Bank and Trust</b> <b>PO Box 351</b> <b>Boston, MA 02101</b> <b>ABA Number - 011000028</b> <b>Account Number: 9083-472-2</b> <b>For Benefit of: SBERA Prime Meridian Account</b>	<b>Bank Number:</b>	
	<b>Bank Name:</b>	
	<b>Transferring Account Number:</b>	
	<b>Date of Transfer</b>	
	<b>Total Amount of Wire Transfer:</b>	

401(k) Payments		Defined Benefit Payments	
Payroll Date:		Month Ending:	
Employee Contributions:	\$	Employee Contributions:	\$
Employer Match:	\$	Normal Cost:	\$
Profit Sharing:	\$	Defined Benefit Plan Subtotal:	\$
QNEC:	\$	Quarterly Assessment Payment:	\$
Loans:	\$	Minus Credit from Previous Quarter:	\$
401(k) Plan Payroll Sub Total:	\$	Total Amount to Defined Benefit Plan:	\$
Quarterly Assessment Payment:	\$		
Minus Voucher Credit:	\$ (            )		
Total Amount to 401(k) Plan	\$		

SBERA USE ONLY		
<b>Wire Number:</b>		
Task	Initials	Date Completed
E-Mail File Received:		
Payroll File Entered / Re-formatted:		
Wire Received:		
Wire Moved: (deposit date)		
Wire Approved:		
Date Bank Confirmed:		
Date File Posted:		

**SBERA Distribution**

Original: Wire Transfer Book

Copies: Accounting