

### Payment Instructions

Name of Beneficiary/Claimant: [REDACTED]

Account Name (Exact Name on Account): THE MARSH LAW FIRM PLLC ATTORNEY TRUST ACCOUNT IOLA

Address of Account Holder: [REDACTED] New York, New York 10001-2170

Account Number or IBAN: [REDACTED]

Name of Financial Institution: JP MorganChase Bank

Wire Routing # or SWIFT Code: [REDACTED]

*If the payment will go through an intermediary bank, please contact Elise Frejka at [REDACTED] to provide additional required information.*

**I hereby authorize Simone Lechuk, the Claims Administrator, to wire my allocation from the Epstein Survivors' Settlement Fund JPM Qualified Settlement Fund to the account referenced above. I understand that the Claims Administrator or her counsel will contact me prior to initiating payment to verbally confirm these payment instructions and that payment cannot be made absent such verification.**

[REDACTED]  
[REDACTED] (Date: 11/20/24 20:45 GMT+3)

Name: [REDACTED]

Email Address: [REDACTED]

Phone Number: + [REDACTED]



# EpsteinSSFJPM - Payment

## Instructions

Final Audit Report

2024-01-17

Created:	2024-01-17
By:	Cassandra Sorrentino ([redacted])
Status:	Signed
Transaction ID:	CBJCHBCAABAAbJIMy8huJu2dWGHTtdLSwotzERlr7UIS

### "[redacted] EpsteinSSFJPM - Payment Instructions" History

Document created by Cassandra Sorrentino ([redacted])  
2024-01-17 - 6:45:48 PM GMT

Document emailed to [redacted] for signature  
2024-01-17 - 7:15:11 PM GMT

Email viewed by [redacted]  
2024-01-17 - 7:15:16 PM GMT

Signer [redacted] entered name at signing as [redacted]  
2024-01-17 - 7:40:03 PM GMT

Document e-signed by [redacted] ([redacted])  
Signature Date: 2024-01-17 - 7:40:05 PM GMT - Time Source: server

Agreement completed.  
2024-01-17 - 7:40:05 PM GMT



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