



Sandie Arnott

TREASURER - TAX COLLECTOR

Robin N. Elliott
ASSISTANT TAX COLLECTOR

March 12, 2020

Pool Participants:

In light of the uptick in account hacking, additional steps are being implemented in our wire request process to better protect your pooled funds.

Effective immediately, all wire requests must be submitted 3 business days in advance of the wire date.

All wire requests will be verified by our investment team with a manager from the requesting department on the wire date, PRIOR to the funds being wired. The requesting department will be asked to verify their name, amount to be wired, account number and wire date. No funds will be wired without this final verification so we request that you have a manager available on the wiring date to confirm the information we will request.

Should you have any questions or concerns, please do not hesitate to contact Tiffany Htwe at 650-599-1239 or me.

Best regards,

A handwritten signature in cursive script, appearing to read "Sandie Arnott".

Sandie Arnott
Treasurer-Tax Collector

cc: Michael Callagy, County Manager
Juan Raigoza, Controller

555 County Center, 1st Floor, Redwood City, CA 94063

Treasurer
(650) 363-4580 ♦ Fax: (650) 363-4944
treasurer.smcgov.org

Tax Collector
(866) 220-0308 ♦ Fax: (650) 599-1511
tax.smcgov.org



San Mateo County Treasurer's Office
Wire Transfer Request

Please provide the following information to ensure credit is applied to the appropriate account. For NON-County send your request only to Treasurer trswire@smcgov.org. For County departments send request to Controller wire@smcgov.org, & Treasurer trswire@smcgov.org with invoice copies and other supporting documentation. All requests must be received 24 hours' in advance. Please note there may be fees to process the wire. When there is an emergency and if the network is not available, please deliver this form to **Treasurer's Office, 555 County Center – 1st Floor, Redwood City, CA 94063**. * Required Fields – Please print legibly.

* Date of Wire:	
* Wire Amount in US Dollar:	
* Bank Name:	
* Bank Address:	
* ABA Routing # (US Banks):	
* SWIFT Code and/or BIC (International Banks)	
* Account Name (Not Payee Name):	
Account Holder's Address:	
* Bank Account Number or IBAN#	
*OFAS Account Number and PEID #	
Additional Information	

* Please inquire from your foreign bank (bank outside the United States) if they need to go through a correspondent bank in order to receive a wire transfer from a US Bank. If "Yes", please provide us the additional information regarding your bank's correspondent bank.

Treasurer's Official Use Only	Date:
* Signature Verified	
* OFAS Balance Verified	
* PIN # (Voluntary Participants Only)	
* Treasurer/Asst.Trsr. approval for over 12.5% withdrawal	
Controller's Official Use Only	Date:
* Wire Approval	

By my signature below, I confirm that I am the (title) _____ of (entity) _____ and as such I have been authorized to provide the information above. I understand that the County may seek confirmation of my authority in writing or by phone.

Signature: _____ Date: _____