

Apr 04 08 03:00p

Hector Maldonado

480-924-1787

p.1

WIRE TRANSFER FORM

ACCT. #: 3167080 NAME: ANTHONY MALDONADO BAUD FATHER DATE: 10-17-2000 FOREIGN DOMESTIC

ADDRESS: 578 E PARKER DR CITY: BARRE STATE: VT ZIP: 05647 TIME: 10:30 AM

PHONE: 978-449-6223 OTHER: _____ W.I.A.L.: _____

Must be verified by Accounting if over \$0,000.00

Check Amount: 6,000

Shares Checking Other

Walk In Cash Debit Card

Phone In Fax

22.00 Domestic 27.00 International 10.00 Recurring

ACCOUNTING USE ONLY

Branch	Account	Verified Accts.
DL Number		Verified GCLIA
CA Number		Reg ID Updated
CR Number		Reg J Discovered
ES DR Num		Reg Ref Number
ES CR Num		

WIRE TO:

Bank Name: CANADIAN IMPERIAL BANK OF COMMERCE

Address: 30 MALSON PARK DRIVE WEST

City & State: BARRE ONTARIO L9N 9H5

Bank's Phone: CANADA

ABA or Routing: 714 03193 SWIFT: BOIC33

Further Credit To:

Bank Name: _____

Address: _____

City & State: _____

Account Number: _____

Final Credit To:

Receiving Party: 143916 ONTARIO INC

Account Number: 77208412 17

Special Instructions: PAGE

Verify at least 4"

Verification Information: Verbal Wire

Member's address name: _____

Joint account name: _____

Address: _____

Other name with memo: _____

Member's email: _____

Signature of the payer: _____

Signature of the payee: _____

D.O.B.: _____

Verification Information: In Person Wire

Member ID: 1638

Driver Lic #: XXXXXX State & Expire: VT 07/2002

Important - Please Read Below

I understand that my signature for payment of any instrument is irrevocable and that I am responsible for the accuracy of the information provided. I understand that I am responsible for the accuracy of the information provided. I understand that I am responsible for the accuracy of the information provided.

ACCOUNTING USE ONLY

Emp. Num	806	1018
Acct. No.	3167080	1018
Branch		
Checked in GCLIA		12/13/07
When received		

Call (800) 461-6816 For Wire Deadlines

Member Signature: _____

Teller Signature: _____

Branch #: 19 Teller #: 19

Message -> 602-316-5816

CASE NO. SA CV 03-950 DOC (JTLx)

ECHOSTAR SATELLITE CORP., et al.,

vs.

NDS GROUP PLC, et al

DEFENDANT'S EXHIBIT 2501A

DATE _____ IDEN.

DATE _____ EVID.

BY _____

Deputy Clerk

Apr 04 08 03:00p

Hector Maldonado

480-924-1787

p.1

73 OCT-17-08 TUE 23:59

MIDU-WEST WIRE TRANSFER FORM

F.01

ACCT. #: 3167080

DATE: 10-17-2000

DOMESTIC FOREIGN

NAME: ANTHONY MALDONADO BAUD PATRICK

TIME: 10:30 AM

ADDRESS: 5122 E PARKER DR WINDSOR, ONTARIO CANADA N2S 2P1

PHONE: 924-44-6473 OTHER: W.L.N.I.

Must be verified by Accounting if over \$1,000.00

ACCOUNTING USE ONLY

SIBERS CHECKING AMOUNT: 6,000

OVAW WALK IN CASH/DEBIT PHONE IN 22.00 DOMESTIC 27.00 INTERNATIONAL

OTHER 12.00 RECURRING

Bank	Account	Verify Acct.
SA Number	Verify GLIA	
SA Number	Verify GLIA	
SA Number	Verify GLIA	
SA Number	Verify GLIA	
SA Number	Verify GLIA	
SA Number	Verify GLIA	
SA Number	Verify GLIA	

Wire To:

Bank Name: CANADIAN IMPERIAL BANK OF COMMERCE ✓
 Address: 39 NELSON PARK DRIVE WEST ✓
 City & State: GERRY ONTARIO L9N 9H5
 Bank Phone: CANADA
 ABA or Routing: T/N 03192 BANK 010

Further Credit To:

Bank Name: _____
 Address: _____
 City & State: _____
 Account Number: _____

Final Credit To:

Receiving Party: 143716 GUYANA INC
 Account Number: 123456789

Special Instructions:

ACH

recorded 9:05 AM 4/18/08

"Verify at least 4"

Verification Information: Verbal Wires

Name's maiden name _____
 Job/Account Name _____
 Address _____
 Other bank with wires _____
 Signature/Initials _____
 Date of last payment _____
 Signature of teller _____
 Signature of wire _____
 B.O.B.

Verification Information: In Person Wires

Signature _____
 Branch ID _____
 Date & Signature _____

Important - Please Read Below

I understand that my responsibility for providing correct information on this form is to ensure that the information is accurate and complete. I understand that the information provided on this form is used to process the wire transfer and that I am responsible for any errors or delays caused by incorrect information. I understand that the information provided on this form is used to process the wire transfer and that I am responsible for any errors or delays caused by incorrect information.

Call (800) 441-8810 For Wire Deadlines

Member Signature: _____
 Teller Signature: _____
 Branch #: _____ Teller #: _____

ACCOUNTING USE ONLY

By	806	10/18
By	806	10/18
By	806	10/18
By	806	10/18

Checked in GLIA: 3/22/08 H
 Wire received: _____
 Wire sent: _____

Message -> 602-316 5816