

From: [Larry Caudill](#)
To: [Kristin DiIorio](#)
Cc: [Casey Crowther](#)
Subject: Target Roofing - WIRE NEEDED
Date: Friday, July 17, 2020 12:53:14 PM
Attachments: [0846_001.pdf](#)

Kristin,

Can we get these funds wired today?

Larry Caudill

Controller, Target Roofing & Sheet Metal

Ask me about our Annual Roof Maintenance Plans.

- ☐ 239-332-5707
- ☐ 239-785-5025
- ☐ larry@targetroofers.com
- ☐ www.targetroofers.com
- ☐ 1841 Ortiz Ave, Fort Myers, FL 33905
- ☐ Urgent Issue? Contact My Manager:
Casey Crowther – 239-888-6369



From: opscopier@targetroofers.com <opscopier@targetroofers.com>
Sent: Friday, July 17, 2020 12:43 PM
To: Larry <Larry@targetroofers.com>
Subject: Target Roofing

GOVERNMENT EXHIBIT

Exhibit No.: 30

Case No.: 2:S20-cr-114-FtM-JES-MRM

UNITED STATES OF AMERICA

vs.

CASEY DAVID CROWTHER

Date Identified: _____

Date Admitted: _____

Wire/Funds Transfer Payment Order



ORIGINATING BANK PROCESSING DATA

Sender ABA: 067015287 Name: SANIBEL CAPTIVA COMM BK
Receiver ABA: 061113415 Short Name: Operating Account
Amount: \$ 150,000.00 Fee: \$

ORIGINATOR DATA

Identifier/Account #: 29061791 Address: 1841 Ortiz Ave
Name: Target Roofing Sheet Metal Address:

(ULTIMATE) BENEFICIARY DATA

Identifier/Account #: 29062271 Address:
Name: Steve Adkiss Address:

Reference for Beneficiary: [Redacted] Note Payment

Originator to Beneficiary Info:

INTERMEDIARY FINANCIAL INSTITUTION

Identifier/Account #: Address:
Name: Address:

Intermediary FI Info:

BENEFICIARY FINANCIAL INSTITUTION

Identifier/Account #: 067015287 Address:
Name: Sanibel Captiva Community Bank Address: 1533 Hendry St 100

PROCESSING DATA

Prepared by:

Payment Order

Instructions received: In Person (must be signed)

By Fax, call back info

Purpose: Note Payment

Date: 7/17/20

The undersigned originator requests payment to be made to the beneficiary or account number named above. To the extent not prohibited by law, the undersigned agrees that this wire transfer is irrevocable and that the sole obligation of the institution named above is to exercise ordinary care in processing this wire transfer and that it is not responsible for any losses or delays which occur as a result of any other party's involvement in processing this transfer.

SENDER'S SIGNATURE: [Signature]

EX_30_002

Form-047 (08/10)