



## **Incoming Domestic Wire Instructions**

Please forward the funds utilizing the following instructions:

**Send the funds to:**

### **Beneficiary Bank Information:**

**ABA/Routing # 084000026**

**First Horizon Bank**

**165 Madison Ave.**

**Memphis, TN 38103**

**Providing credit to:**

### **Beneficiary Information**

**Customer Name: Staniel Cay St. Luke's Clinic Foundation, Inc.**

**Customer Account Number: 220007761887**

**Customer Address: 2701 NE 42<sup>nd</sup> St**

**Lighthouse Point FL 33064**

**Additional information:**

**Wires received with missing or incorrect information are returned to the originating bank. To ensure delays are avoided in wire processing, please provide all necessary information.**

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**Staniel Cay  
St. Luke's Clinic  
Foundation** 

If you prefer to send a check for your donation to the St. Luke's Clinic Foundation, please make it payable to Staniel Cay St. Luke's Clinic Foundation and mail it to:

2701 NE 42nd Street  
Lighthouse Point, FL 33064  
Attn: Julia Robinson, Major Gifts Chair

Thank you again for your generous support.