



# INTERNATIONAL WIRE TRANSFER REQUEST

**NOTE:** Due to security reasons and verification purposes, there must be a signature **and** a phone number.  
P.O. Boxes are not accepted. You must provide a physical address as it appears on your account.

## Member Information

Member Name: \_\_\_\_\_ Phone #: (\_\_\_\_)\_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Member License # / State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Account #: \_\_\_\_\_ [ ] Savings [ ] Checking [ ] Other: \_\_\_\_\_

Amount of Wire (USD): \$\_\_\_\_\_ Fee: \$40.00 Consumer / \$50.00 Business

## Receiving Financial Institution & Beneficiary Information

International Bank Name: \_\_\_\_\_

International Bank City & Country: \_\_\_\_\_

8 Digit Swift #: \_\_\_\_\_ IBAN-BIC #: \_\_\_\_\_

U.S. Correspondent Bank Name: \_\_\_\_\_

U.S. Correspondent ABA: \_\_\_\_\_

**Beneficiary Information**

Beneficiary Acct #: \_\_\_\_\_ Beneficiary Name: \_\_\_\_\_

Beneficiary Address: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Purpose of Payment: \_\_\_\_\_

\_\_\_\_\_

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY:

Taken By (Teller #): \_\_\_\_\_ Date: \_\_\_\_\_ Callback Verification By (Teller #): \_\_\_\_\_

OFAC: \_\_\_\_\_ Transfer Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_ AM/PM

Sent By: \_\_\_\_\_ Second Verification By: \_\_\_\_\_