

Wire / Funds Transfer Form

All sections must be completed.



Section A-Originator Information

Originator Name:	Account Number:	Wire Amount: \$
Name of Originator's Authorized Representative:		Phone #:
Taxpayer Identification Number:	Authorization verified with Bank records? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Originator Address (physical Street address only; NO PO Boxes):		
Originator Address (City, State, Zip):		
Date Order Received:	Time:	AM/PM
Wire instruction received by: <input type="checkbox"/> IN PERSON <input type="checkbox"/> FAX <input type="checkbox"/> EMAIL <input type="checkbox"/> OTHER (please specify)		

Section B-Beneficiary Information

Beneficiary Name:	
Beneficiary Address (physical Street address only; NO P.O. Boxes):	
Beneficiary Address (City, State, Zip):	
Beneficiary Account Number:	ABA Routing Number:
IBAN Number (Foreign wires only):	Bank SWIFT/BIC Code (Foreign wires only):
Beneficiary Bank Name:	
Beneficiary Bank Address (physical Street address only; NO PO Boxes):	
Beneficiary Bank Address (City, State, Zip):	
Date of Wire:	
Special Instructions/Reference/Purpose of wire:	

Section C-Payment Method

Debit Authorized Account #	Fee: \$25 domestic / \$40 foreign (circle one)
Customer Signature (REQUIRED):	Employee signature:
Call back made by (wire department):	Fee: \$5 additional for confirmation (phone, fax or email)
Entered By (wire department):	Verified by (wire department):
BANK USE - FOREIGN WIRES ONLY: <input type="checkbox"/> log <input type="checkbox"/> sec 311 <input type="checkbox"/> ofac <input type="checkbox"/> swift <input type="checkbox"/> account <input type="checkbox"/> iban	