

International Wire Transfer Authorization Form



Amount of Wire _____

To be sent in what
currency:

US \$

Foreign Currency

Purpose of Wire _____

Member Information

Name _____

Date of Birth _____

Account # _____

Address _____

Daytime Phone _____

City _____ ST _____ ZIP _____

Email address _____

For Office Use Only

Verification-check all that apply.

ID In Person

Callback phone # that matches system #

Account Activity

H.B. Challenge Questions

Other _____

Accepted By

Teller Stamp

Approved By

Teller Stamp

Receiving Institution Information

Name _____

Address _____

City _____ ST _____ ZIP _____

ABA # / SWIFT / BIC Code _____

National ID _____ Country _____

Phone # _____

Final Credit To:

Name _____ Address _____

Account # _____ City _____ ST _____ ZIP _____

Country _____ Daytime Phone _____ Date of Birth _____

Email address _____ Instructions _____

Signature

Date

Please Note: Your daytime phone number is required so we can call you and confirm your wire transfer request. We cannot process your request without your verbal confirmation.