## INTERNATIONAL WIRE TRANSFER REQUEST FORM — INSTRUCTIONS

FIGFCU offers international wire services. Your completed and accurate wire form with any attachments must be received by **11:30 AM PST**. Requests received after the deadline will be processed the following business day. International Wire request is subject to additional review and may experience delays.

The information below will guide you on how to complete the International Wire Transfer Form.

- Date to be sent
   Actual date when the wire will be sent.
- Member Number Provide your member number.

## Section 1: Sender/ Account Holder Information On File

- Account Number Actual account number (not member number) where the funds will be withdrawn from. Please note that we cannot process a wire from a Money Market, Online or Premium Trust Account
- Account Type must be checked Select Checking or Savings
- Member Name Member or Joint Owner requesting the wire transfer
- 6. Member Address Full address of the member
- 7. Best Contact Phone Number
- 8. Email (if confirmation needed) Email address

#### **Section 2: Wire Amount**

9. **Amount** — Write the amount of the wire using numbers. Please do not include the fee.

Note: The maximum amount for international wire transfer is \$25,000,00.

10. **Written amount** — Write the amount using words, e.g., five thousand sixty

# Section 3: Receiving Financial Institution Information

- 11. **International Financial Institution Name** The name of the Foreign Financial Institution receiving the funds.
- 12. **Address** Street number and street name of the Foreign Financial Institution
- 13. **City/State/Zip** City, State, Zip of the Foreign Financial Institution
- 14. **Country** Country of the Foreign Financial Institution
- 15. **SWIFT** SWIFT Code of the Foreign Financial Institution
- 16. **Additional Information** additional details required by the receiving Foreign Financial Institution can be indicated in this field

#### **Section 4: Intermediary Bank Information**

Use this section only if the Foreign Financial Institution is using a Correspondent Bank located in the US to process and transmit the international wire. This Financial Institution has a direct relationship with the foreign bank. The funds will be transmitted to this Financial Institution and they will handle the processing of wire transfer to the foreign bank.

- Financial Institution Name The Financial Institution receiving the funds locally
- Routing Number The nine digit routing number of the domestic Financial Institution
- Account Number Enter the number provided by the correspondent bank. This field can be left blank if no information was disclosed by the receiving Financial Institution.
- Address The Beneficiary Financial Institution's address.

2. WIRE AMOUNT USD Amount: 9 (Numbers Only)	ate to be sent:	1	Member Number	2
Account Number:   3	(recipient) of the wire. Incorrect inforr additional review and may experience is not liable for any losses suffered du received by 11:30 AM PST. Requests no other financial institution within four t financial institution. A service charge of	mation can result in del e delays. Wire cannot be le to incorrect informati received after the deadl to eight business days a will be assessed - See S	lays in wire processing and/or loss of funds. In e processed from a Money Market, Online, Pre- tion provided. Your completed and accurate we line will be processed the following business of and may experience additional delays due to the Schedule of Fees. Additional fees may be dedu-	remational Wire request is subject to mium Trust or Club Accounts. FIGFCL re form with any attachments must lay. Funds are generally received at the processing time of the beneficiary cted from your wire as a passthrougl
Member Name:   5	. SENDER/ACCOUNT HOLDER INF	FORMATION ON FILE		
Alember Address:   6	Account Number:		4 □Checking	☐Savings ☐GL (Internal Use O
Sept Contact Number:   7	Member Name:			
See Country: 14 SWIFT: 15 SWIFT: 16 SWIFT: 16 SWIFT: 16 SWIFT: 17	Member Address:			
S. ABCEEIVER'S INFORMATION (BENEFICIARY)   S. RECEIVER'S INFORMATION (Authors Signature)   S. ABCEEIVER'S INFORMATION (Authors Signature)   S. ABCEEIVER'S INFORMATION (Complete only if using a US correspondent or middle bank)   S. ABCEEIVER'S INFORMATION (Complete only if using a US correspondent or middle bank)   S. ABCEEIVER'S INFORMATION (BENEFICIARY)   S. ABCEE	Best Contact Number:	7	Email (If confirmation needed)	i <u> </u>
(Numbers Only)  S. RECEIVING INTERNATIONAL FINANCIAL INSTITUTION INFORMATION International Financial Institution Name: 11 Address: 12 City/State/Zip: 13 Country: 14 SWIFT: 15 Additional Information: 16 4. INTERMEDIARY BANK INFORMATION (Complete only if using a US correspondent or middle bank) Financial Institution Name: 17 Routing Number: 18 Account Number (if available): 19 Address: 20 S. RECEIVER'S INFORMATION (BENEFICIARY) Name: 21 Account Number/IBAN/CLABE: 22 Address: 23 City/State/Zip: 24 Country: 25 Contact Name: 26 Contact Number: 27 S. MISCELLANEOUS/REFERENCE INFORMATION 28 7. PURPOSE OF WIRE	2. WIRE AMOUNT			
S. RECEIVING INTERNATIONAL FINANCIAL INSTITUTION INFORMATION		Writte		
11		NANCIAL INSTITUT		
Address: 12  City/State/Zip: 13  Country: 14 SWIFT: 15  Additional Information: 16  III. INTERMEDIARY BANK INFORMATION (Complete only if using a US correspondent or middle bank)  Financial Institution Name: 17  Routing Number: 18 Account Number (if available): 19  Address: 20  5. RECEIVER'S INFORMATION (BENEFICIARY)  Name: 21  Account Number/IBAN/CLABE: 22  Address: 23  City/State/Zip: 24 Country: 25  Contact Name: 26  Contact Name: 27  5. MISCELLANEOUS/REFERENCE INFORMATION  28  C. PURPOSE OF WIRE			ION INFORMATION	
13		diffe.		
14				
Additional Information: 16 4. INTERMEDIARY BANK INFORMATION (Complete only if using a US correspondent or middle bank)			CMET	15
Account Number/BAN/CLABE: 22 Address: 23 City/State/Zip: 24 Country: 25 Contact Name: 26 Contact Name: 27 Contact Name: 28 Contact Name: 27 Contact Name: 27 Contact Name: 27 Contact Name: 28 Contact Name: 27 Contact Name: 27 Contact Name: 27 Contact Name: 28 Contact Name: 27 Contact Name: 27 Contact Name: 27 Contact Name: 28 Contact Name: 27 Contact Name: 27 Contact Name: 27 Contact Name: 28 Contact Name: 27 Contact Name: 28 Co			SWIFT:	10
17			ally if using a LIS correspondent or middle	banks
18		4-	ily ir using a 03 correspondent or middle	Dalik)
Address: 20  5. RECEIVER'S INFORMATION (BENEFICIARY) Name: 21 Account Number/IBAN/CLABE: 22 Address: 23  City/State/Zip: 24 Country: 25 Contact Name: 26 Contact Number: 27  5. MISCELLANEOUS/REFERENCE INFORMATION  28 7. PURPOSE OF WIRE		40	A	10
5. RECEIVER'S INFORMATION (BENEFICIARY)  Name: 21  Account Number/IBAN/CLABE: 22  Address: 23  City/State/Zip: 24 Country: 25  Contact Name: 26 Contact Number: 27  6. MISCELLANEOUS/REFERENCE INFORMATION  28  7. PURPOSE OF WIRE	<del>-</del>		Account Number (If available): _	19
Name: 21 Account Number/IBAN/CLABE: 22 Address: 23  City/State/Zip: 24 Country: 25 Contact Name: 26 Contact Number: 27 S. MISCELLANEOUS/REFERENCE INFORMATION 28 7. PURPOSE OF WIRE	Address:	20		
Account Number/IBAN/CLABE: 22  Address: 23  City/State/Zip: 24 Country: 25  Contact Name: 26 Contact Number: 27  5. MISCELLANEOUS/REFERENCE INFORMATION 28  7. PURPOSE OF WIRE	5. RECEIVER'S INFORMATION (BE	NEFICIARY)		
Address: 23  City/State/Zip: 24 Country: 25  Contact Name: 26 Contact Number: 27  6. MISCELLANEOUS/REFERENCE INFORMATION 28  7. PURPOSE OF WIRE	Name:	21		
City/State/Zip: 24 Country: 25 Contact Name: 26 Contact Number: 27 6. MISCELLANEOUS/REFERENCE INFORMATION 28 7. PURPOSE OF WIRE	Account Number/IBAN/CLABE:	22		
Contact Name: 26 Contact Number: 27  5. MISCELLANEOUS/REFERENCE INFORMATION  28  7. PURPOSE OF WIRE	Address:	23		
Contact Name: 26 Contact Number: 27  5. MISCELLANEOUS/REFERENCE INFORMATION  28  7. PURPOSE OF WIRE				
6. MISCELLANEOUS/REFERENCE INFORMATION  28 7. PURPOSE OF WIRE	City/State/Zip:			
28 7. PURPOSE OF WIRE	Contact Name:	26	Contact Number:	27
7. PURPOSE OF WIRE	S. MISCELLANEOUS/REFERENCE	INFORMATION		
		28		
29	7. PURPOSE OF WIRE			
		29		
ease attach wiring instructions for Title or Escrow Wires. Wet signature or stylus signature is required. Pre-defined DocuSign signature will not be accept				
By signing below, I certify that the information provided is correct and I agree with the terms set forth.	Mombor's Signature	30	Date	

## Section 5: Receiver's Information (Beneficiary)

The fields below are mandatory and required to be completed. Please do not leave any field blank.

- 21. Name Person or Company who owns the account receiving the funds
- 22. **Account Number** The Recipient's Account Number/ International Bank Account Number/ CLABE
- 23–25. Address, City/State/Zip, Country Recipient's full address is required
- 26-27 **Contact Name and Contact Number** Usually the receiver's name and the phone number

Note: If the Receiver of the wire is a Title/ Escrow Company, member must provide a copy of the wiring instructions from the Title/ Escrow Company.

#### Section 6: Miscellaneous/ Reference Information

28. This box is used to provide further information that will be sent to the receiving institution or beneficiary of the wire. Information such as escrow number, escrow officer's name, a further account number, or a reference for a loan (e.g. "pay off car loan").

### Section 7: Purpose of Wire

 Member is required to enter information on this field as a Bank Secrecy Act requirement.

#### Section 8: Member's Signature and Date

- 30. **Member's Signature** Member sending the wire must sign the form. Please note that wet signature or stylus signature is required. Pre-defined DocuSign signatures will not be accepted.
- 31. Date Write the date when the form was signed

Review all the information on the form for accuracy. Once completed, please send the form to FIGFCU's Wire Processing Team at msc@figfcu.org or fax it to 323.209.6739.

For additional information or questions, please contact us at 323.209.6254.