

International Wire Transfer Form

For security purposes, please return this form in person or by mail. Do not send it by email.

| Date | Staff Initials/Teller # |
|---|--|
| Member Name | |
| Member # | Member Phone # |
| Amount \$ | |
| Name of Financial Institution | |
| Address of Financial Institution (required) | |
| International Bank Account | |
| IBAN # | Swift Code # |
| Further Credit | |
| Account # | |
| Final Credit Account Name | |
| Address of Final Credit (required) | |
| Final Credit Account # | |
| By signing below, I certify all inf | formation is true and correct to the best of my knowledge. |
| Signature | |
| | |
| Internal Use Only: | |
| Member Callback Verification Time | Date |
| Wire Completed By | Wire Posted By |
| Corporate Verification # | |