



## International Wire Transfer Authorization Form

### ORIGINATOR/SENDER INFORMATION

Originator's Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Account # w/ Trailer: \_\_\_\_\_ Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Amount (U.S. Dollars): \$ \_\_\_\_\_ (\$35.00 Fee)  
 Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

### BENEFICIARY/RECIPIENT INFORMATION

Beneficiary's Name: \_\_\_\_\_  
 Account # or IBAN\*: \_\_\_\_\_  
 Address 1: \_\_\_\_\_ Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ Country: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

\*A valid IBAN (International Bank Account Number) is required for payments to Israel and European Union Countries. An IFSC (Indian Financial System Code) is required for payments to India.

### REFERENCE INFORMATION

Purpose of Transaction\*\*: \_\_\_\_\_

\*\*Payment purpose or reason is mandatory for certain transfers to Argentina, Bangladesh, Columbia, Indonesia, Israel, Poland, Russia, Slovakia, Thai Baht, and Venezuela. Other restrictions may apply.

### BENEFICIARY BANK INFORMATION

Bank Identifier Number (Select At Least One) SWIFT, UKSORT, BLZ, BSB, TRNO: \_\_\_\_\_  
 Beneficiary Bank Name: \_\_\_\_\_  
 Beneficiary Bank Address: \_\_\_\_\_  
 Country: \_\_\_\_\_ City: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

### ORIGINATOR/SENDER AUTHORIZATION

The undersigned represents that the above information is correct and acknowledges responsibility for any errors resulting from incorrect information provided. The undersigned releases Best Reward Credit Union from all liability from any loss, unless the loss arises out of the credit union's failure to exercise ordinary care, act in good faith, or act in accordance with the instructions given pursuant to this Authorization. The credit union and other financial institutions may rely on the account or other identifying number as the proper identification, even if it identifies a different party or institution. You authorize the credit union to transfer funds as described herein and debit your account in the amount transferred, plus applicable charges. The credit union has no influence or responsibility for fees or surcharges imposed by other financial institutions involved in the transfer of funds.

Originator's Signature: \_\_\_\_\_

### INTERNAL USE ONLY

Accepted by: \_\_\_\_\_ Information Verified & Processed by: \_\_\_\_\_  
 Funds Collected     Fee Collected     OFAC Verification     Log Identification Provided Revised 02/18  
 Call-Back Confirmation - Date: \_\_\_\_\_ Time: \_\_\_\_\_ Employee's Name: \_\_\_\_\_