

INTERNATIONAL WIRE TRANSFER REQUEST

Name:		Member Number:		
Phone:	Email:			
INTERNATIONAL WIR	E INFORMATION			
Wire that exceeds the US Dollar	Value of \$50,000.00. Rolling 30-day per	tional Wire – Hanscom Federal Credit Union will not send an International riod – US Dollar Value of \$50,000.00 – this is the maximum dollar amount I D or Passport MUST be included with each International Wire Form.		
FUND TRANSFER OPTIONS: (CHOS	e one)			
	rency Foreign Currency Type: m your account and converted to the foreign cur	rrency specified above prior to being sent to the beneficiary bank.		
□ Foreign Currency (US \$	debit) to Foreign Currency	Foreign Currency Type:		
The US \$ equivalent of the foreign current be received at the beneficiary bank.	ency listed wire amount will be debited from yo	ur account. This method should be used when a specific amount of foreign currency needs to		
		ABA #/SWIFT Code:		
		in the foreign country is not specifically designated to receive US \$, the foreign bank will wn exchange rate, and applicable transaction fees.		
Transaction Amount Wire	d \$			
l authorize Hanscom Federal Cre	edit Union to debit the wire and wire ch	arge of \$50.00 from the account suffix noted below.		
□ Savings Suffix #:	□ Checking Suffix #: □ Ot	her Suffix #:		
BENEFICIARY INFORMATI	ON			
Beneficiary's Bank		Bank Address		
City/Town	Province	State/Country		
Postal Code	Bank/Sort Code	Swift Number		
Bank code is requir	red for GBP wires (Great Britain/United	Kingdom) /5-digit Sort Code is required for wires going to Kenya.		
Beneficiary Name	Beneficiary Phone			
Beneficiary Address	City/State/Zip			
Beneficiary Account #/IBAN				
A valid IBAN is required for all w	rires going to Europe / An 18-digit CLAB	E # is required for all wires going to Mexico.		

Reason/Reference for Payment

All wires must include a reason for payment and phone number for the beneficiary.

I understand that Hanscom Federal Credit Union is acting strictly as an agent and will act only on the instructions that I have provided. In the event that the information provided is incomplete or incorrect, I release Hanscom Federal Credit Union from any liability that may result. The payee or any Financial Institution (FI) may be identified by name, account number, or ABA #. Hanscom Federal Credit Union (and other institutions) may rely on the account or other identifying number as the proper identification, even if it identifies a different party or institution. Regulation J governs a wire transfer cleared through the Federal Reserve. I authorize Hanscom Federal Credit Union to transfer funds as described herein and debit my account in the amount transferred, plus applicable charges. I understand that should I request a wire by fax, or by secure email, the wire will be verified by a call-back from a Credit Union employee to me using a telephone number currently on file at Hanscom Federal Credit Union. This call-back may require me to send a secure email verifying the authenticity of the fax request.

Signature:		Date:	
Con	MPLETED BY MEMBER SERVICE REPRESE	ENTATIVE	
Request received through 🗆 Secure Email 🛛 Fax 🗖 N	/ail 🛛 In Person - Branch Office		
Form completed and Member Signature verified by		Date verified /	/Time verified
Verification of Member – Type of ID	ID #	Expiration	Date of ID
Secondary Verification for completeness of form – Emp	oloyee Name (other than above)		
Federally Insured by NCUA Updated 06/2024			