



# INTERNATIONAL WIRE TRANSFER CONSUMER MEMBER REQUEST

### MEMBER INFORMATION

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 Account #: \_\_\_\_\_ City, State and Zip Code: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Email Address\* \_\_\_\_\_  
 Please choose selection that applies: Personal Fax Number\* \_\_\_\_\_  
 Transfer US Dollars \$ \_\_\_\_\_ Purpose of the Wire: \_\_\_\_\_  
 Transfer Foreign Currency \$ \_\_\_\_\_  
 Transfer \$ \_\_\_\_\_ worth of \_\_\_\_\_  
 (US Dollars) (Foreign currency)  
 Total debit based on currency conversion will be printed on receipt. Select One:  Email  Personal Fax INITIALS: \_\_\_\_\_

**If wire request submitted by fax, select below:**

\* This will be used to provide a pre-payment disclosure and receipt for your transaction.

### RECEIVING BANK INFORMATION

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 SWIFT Code: \_\_\_\_\_ City and Country: \_\_\_\_\_  
 Transit Code (Canada-9 digit #)\*\*: \_\_\_\_\_ Financial System Code: (INDIA-11 digit alpha numeric)\*\*: \_\_\_\_\_  
 Branch Information: \_\_\_\_\_  
 \*\*Additional information required for designated country INITIALS: \_\_\_\_\_

### RECIPIENT INFORMATION ( beneficiary person or company receiving wire)

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 Account #: \_\_\_\_\_ City and Country: \_\_\_\_\_  
 IBAN #: \_\_\_\_\_  
 Required Information--Beneficiary contact name and telephone number: \_\_\_\_\_  
 INITIALS: \_\_\_\_\_

I understand that Tropical Financial CU will charge a wire transfer fee to my account (refer to the Schedule of Fees) and that the receiving bank may also charge an incoming wire transfer fee to the beneficiary (recipient) account. I understand that a disclosure and wire receipt will be provided to me and that my signed acknowledgement is required on the wire receipt. If the wire transfer request is submitted via fax, I authorize Tropical Financial CU to send the prepayment disclosure and wire receipt to the e-mail or fax number listed above.

**IMPORTANT NOTICE:** Tropical Financial CU relies on the information that you have provided in order to transfer funds to another bank account. Please be sure that the information you have provided to us is accurate and complete, including the account number, financial institution details and the currency of the Recipient's account. Your funds transfer request may settle by the beneficiary bank's routing number and the beneficiary's account number that you have provided, even if the name given for the beneficiary bank and/or the beneficiary account do not match. If the account number or details are incorrect, your funds may be sent to the wrong bank account number and may not be recovered.

By Federal law, all wire transfer funds are verified against the Office of Foreign Assets Control's (OFAC) designated lists.

INITIALS: \_\_\_\_\_

**Outgoing international wire transfer cutoff time is 2:30 PM**

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**If by Fax: Return Completed Form to Wire Dept. (954) 499-6793**

**Include a Copy of Your Driver License**

## To be completed by Credit Union:

#### Account Verification

Member ID: \_\_\_\_\_  
 Member Phone Contact: \_\_\_\_\_  
 Employee Name and ext.#: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Supervisor Signature: \_\_\_\_\_

#### Wire Department:

Entered: \_\_\_\_\_  

| Name | Date | Time |
|------|------|------|
|      |      |      |

Verified: \_\_\_\_\_  

| Name | Date | Time |
|------|------|------|
|      |      |      |

Released: \_\_\_\_\_  

| Name | Date | Time |
|------|------|------|
|      |      |      |