



25 Porter Road, Suite 100
 Littleton, MA 01460
 www.hfcu.org | 800.656.4328

INTERNATIONAL WIRE TRANSFER REQUEST

Name: _____ Member Number: _____

Phone: _____ Email: _____

INTERNATIONAL WIRE INFORMATION

There is a mandatory "not-to-exceed" dollar limit in sending an International Wire – Hanscom Federal Credit Union will not send an International Wire that exceeds the US Dollar Value of \$50,000.00. Rolling 30-day period – US Dollar Value of \$50,000.00 – this is the maximum dollar amount permitted for a 30-day period.

A copy of a valid US Drivers' License or Passport MUST be included with each International Wire form.

You may select one of three ways to transfer funds. **US Dollars to Foreign Currency** – The debit from your account will be made in US \$ and converted to the appropriate foreign currency specified on this wire form prior to being sent to the beneficiary bank. **Foreign Currency to Foreign Currency** – This method should be used when a specific amount of foreign currency needs to be received at the beneficiary bank. The US \$ equivalent of the currency amount will be debited from your account. **US Dollars to US Dollars** – The full amount of the wire will be sent in US \$ and debited from your account. If the account in the foreign country is **not** specifically designated to receive US \$, the foreign bank will convert the funds into the foreign country's domestic currency upon arrival, using its own exchange rate, and applicable transaction fees. This may also delay the proper and timely crediting of funds. If unsure, contact the beneficiary to get specific instructions from the foreign bank where the account is held.

US Dollars to Foreign Currency Foreign Currency to Foreign Currency US Dollars to US Dollars **Initials:** _____

Transaction Amount Wired \$ _____ Wire Charge \$50.00 Foreign Currency Type (if applicable): _____

Savings Suffix #: _____ Checking Suffix #: _____ Other Suffix #: _____

I authorize Hanscom Federal Credit Union to debit the wire and wire charge from the account suffix noted above.

For Us Dollars to Us Dollars: Correspondent Bank: _____ ABA #/SWIFT Code: _____

BENEFICIARY INFORMATION

Beneficiary's Bank _____ Bank Address _____

City/Town _____ Province _____ State/Country _____

Postal Code _____ Bank/Sort Code _____ Swift Number _____

Bank code is required for GBP wires (Great Britain/United Kingdom) /5-digit Sort Code is required for wires going to Kenya

Beneficiary Name _____

Beneficiary Address _____ City/State/Zip _____

Beneficiary Account #/IBAN _____

A valid IBAN is required for all wires going to Europe / An 18-digit CLABE # is required for all wires going to Mexico.

Reason/Reference for Payment _____ Beneficiary Phone _____

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: _____

COMPLETED BY MEMBER SERVICE REPRESENTATIVE

Request received through In Person Secure Email Fax Mail

Employee Name completing form _____ Operator # _____ Extension # _____ Branch Office _____

Member Signature was verified by Employee Name _____ Date verified ____/____/____ Time verified _____

Verification of Member – Type of ID _____ ID # _____ Expiration Date of ID _____

Secondary Verification for completeness of form – Employee Name (other than above) _____ Operator # _____

FOR CREDIT UNION OPERATIONS USE

Member reached for verification? Yes No Employee Name _____ Date verified ____/____/____ Time verified _____

Information for Outgoing Wire to be completed by Operations Team Member **OFAC Verified by:** _____ **on** ____/____/____

Initiated by _____ Approved by _____ Funds Withdrawn by _____ Funds Verified by _____