

WIRE TRANSFER & ACH PAYMENT INSTRUCTIONS

Complete all applicable sections. Please print clearly or type.

This form contains sensitive financial information — handle securely.

FORM TYPE:

☐

Domestic Wire

☐

International Wire (SWIFT)

☐

ACH Credit

☐

ACH Debit

1. ACCOUNT HOLDER / REQUESTOR INFORMATION

Full Legal Name / Company Name *

First Name

Last Name

Title / Position

Date of Request (MM/DD/YYYY)

Mailing Address (Street / PO Box)

City

State / Province

ZIP / Postal Code

Country

Primary Phone Number

Mobile / Alternate Phone

Email Address

Fax Number (optional)

Tax ID / EIN / SSN (last 4 digits for verification)

Customer / Account Reference ID

2. SENDER'S BANK INFORMATION (YOUR BANK — SENDING FUNDS)

Sender's Bank Name *

Bank Branch Name / Location

Sender's Account Title / Name on Account *

Sender's Account Number *

Confirm Account Number *

ABA / Routing Number (9 digits) *

Account Type

Bank Street Address

☐ Checking

☐ Savings

☐ Money Market

☐ Business Checking

3. BENEFICIARY / RECIPIENT'S BANK INFORMATION (RECEIVING BANK)

Beneficiary Bank Name *

Bank Branch Name / Location

Beneficiary Bank Country

ABA / Routing Number (Domestic) *

SWIFT / BIC Code (International) *

 e.g. BOFAUS3N

IBAN (if applicable)

Sort Code / BSB / Transit Number (if applicable)

Beneficiary Bank Street Address

City

State / Province

ZIP / Postal Code

Bank Phone Number

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Bank Fax Number (optional)

4. BENEFICIARY / RECIPIENT ACCOUNT INFORMATION

Account Holder Full Legal Name *

Account Number *

Confirm Account Number *

Account Type

Account Currency

 e.g. USD, EUR, GBP

☐ Checking

 ☐ Savings

 ☐ Money Market

 ☐ Business Checking

Beneficiary Street Address

City

State / Province

ZIP / Postal Code

Country

Beneficiary Phone Number

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Beneficiary Email Address

5. INTERMEDIARY / CORRESPONDENT BANK (IF REQUIRED)

Intermediary Bank Name

ABA / Routing Number

SWIFT / BIC Code

WIRE TRANSFER & ACH PAYMENT INSTRUCTIONS (continued)

6. TRANSFER / PAYMENT DETAILS

Transfer Amount *

\$ 0.00

Currency *

e.g. USD

Requested Transfer Date (MM/DD/YYYY) *

MM/DD/YYYY

Value Date / Settlement Date

MM/DD/YYYY

Purpose / Reason for Transfer *

e.g. Invoice payment, payroll, loan repayment

Invoice / Reference Number(s)

Payment Frequency

☐ One-Time ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Quarterly

Additional Wire / Payment Instructions / Memo

OBI (Originator to Beneficiary Information)

Optional free-text message to recipient (max 140 chars for wire)

7. ACH-SPECIFIC INFORMATION (COMPLETE FOR ACH ONLY)

SEC Code

e.g. PPD, CCD, WEB

Company Entry Description

e.g. PAYROLL

Effective Entry Date

MM/DD/YYYY

Individual Name (for PPD entries)

Individual ID / Employee ID

Company Name (as registered with ODFI)

Company ID / Tax ID

Discretionary Data (optional)

Addenda Record / Payment Related Info

8. AUTHORIZATION & SIGNATURE

By signing below, I/we hereby authorize the transfer of funds as described above and certify that the information provided is accurate and complete. I/we understand that wire transfers and ACH transactions may be irrevocable once processed. I/we agree to indemnify and hold harmless the financial institution from any losses arising from incorrect information provided herein. This authorization remains in effect until revoked in writing.

Authorized Signature *

Date *

MM/DD/YYYY

Print Name *

Title / Role *

Second Authorized Signature (if required)

Date

MM/DD/YYYY