# **International Wire Transfer Authorization**

Brickyard Bank only accepts this form In-P  Originator (Sender) Information	,		•		
		Account Number			
Name/Title of Account Street Address					
Street Address State			ZIP		
Fmail		Phone Number			
Receiving Bank Information					
Bank Name			Swift Code		
Street Address			State		
Correspondent Bank Information, if a					
Bank Name			Routing Number		
Address	City		 State	ZIP	
Beneficiary (Receiver) Information					
Beneficiary Name					
Beneficiary Contact		Contact Phone Number			
Routing Code	Purpose of Pa	ayment			
Street Address					
City	State	ZIP	Countr	у	
IBAN Number			Account Numbe	r	
Other Instructions and/or Information	ation				
Wire Transfer Selections and Amount	; ;	***MAXIMUM AMOUN	T OF AN INTERNATIONAL V	WIRE TRANSFER IS \$500,000***	
Dollar Amount of Wire Transfer		Wire Transfer Fee: \$50.00			
Recipient may receive less due to fees char you think there is an error, contact us within you can cancel for a full refund within 30 m For questions or complaints about Brickyard Ilinois Regulatory Agency - 217-785-0820 www.illinois.gov	in 180 days at 847-679-2 inutes of payment, unle d Bank, contact: Consumer Financi	265. You can also contacts ss the funds have been place al Protection Bureau Y) or 855-729-2372 (TDE	ct us for a written explanat	•	
Originator Authorization					
Customer Signature					
Please note that international wire may tal FOR BANK USE ONLY: Please Fax Authorization - Customer Identity Verifi	attach all support pe		stination ransfer (Fax Authorizatio	on)	
Call Back Contact Name:		Call Back Verificatio	n Date & Time:		
SSN/TIN #(Last 4 Digits Only)	Approved By:				
Method Received By In Person	] Fax ☐ Leapfile	Call Back Phone Numb	oer:	Initials:	

# INTERNATIONAL WIRE TRANSFER REQUEST INSTRUCTIONAL GUIDE

This form is designed to assist in the completion of the Wire Transfer Request Form. Please read over the instructions carefully. Each line item on the request form is identified below with a brief description and/or purpose of the information.

## Fax completed forms to (847) 679-9077

Date: Enter the date the transfer is to be completed.

## **Originator (Sender) Information**

- Name/Title of Account: Customer's or legal entities name on the account
- Account Number: Brickyard Bank account number to be debited.
- Address: Customer's or legal entities address for the above mentioned account.
- Telephone Number: Provide a current telephone to be reached easily if necessary.

#### **Receiving Bank Information**

- Bank Name: The financial institution receiving the funds.
- Routing Number: The ABA Routing number of the institution receiving the funds.
- Address: The address of the institution receiving the funds.
- Branch Number: More detailed information of the location of the bank by number
- SWIFT Code: Please provide the SWIFT Code if available (sometimes known as a BIC Code) of the foreign institution.

#### **Correspondent Bank Information (if available)**

- Bank Name: Intermediary bank name, if available
- Correspondent Bank ABA Routing Number: Routing number of intermediary bank
- Correspondent Bank Address: Address of intermediary bank

#### **Beneficiary (Receiver) Information**

- Beneficiary Name: The name of the person or entity receiving the wire transfer funds.
- Account Number: The account number of the recipient.
- Address: Enter the recipient's full and complete street address.

## Other Instructions and/or Information

 If applicable, use this section to enter any miscellaneous or payment details pertaining to the transfer.

#### **Wire Transfer Selection and Amounts**

- Dollar Amount of Wire Transfer: The amount of the funds to be transferred.
- Fee Amount: The amount the customer will be charged for the wire transfer.

# **Originator Signature**

• Customer Signature: The wire transfer must be signed prior to processing.

#### **FOR BANK USE:**

**Do not** fill this section. This is for Brickyard Bank employees to complete upon receipt of the wire transfer form.