



**Sender Information (Originator)**

**Outgoing Wire Transfer Request**

Date of Transfer: \_\_\_\_\_ Amount of wire transfer US Dollar\$ \_\_\_\_\_

Bank of Santa Clarita Account Number \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Receiver Information (Beneficiary)**

Beneficiary Name: \_\_\_\_\_

Beneficiary Address: \_\_\_\_\_

Beneficiary City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Beneficiary Account Number \_\_\_\_\_

**Beneficiary Financial Institution**

Beneficiary's Bank Routing # \_\_\_\_\_

Beneficiary's Bank Name \_\_\_\_\_

Beneficiary's Bank Address \_\_\_\_\_

Beneficiary's City/State/Zip \_\_\_\_\_

**Originator to Beneficiary Text:** \_\_\_\_\_

**Intermediary Financial Information**

Intermediary Bank Routing # \_\_\_\_\_

Intermediary Bank Name \_\_\_\_\_

Intermediary Bank Address \_\_\_\_\_

Intermediary City/State/Zip \_\_\_\_\_

**Customer Signature**

**Internal Use: Wire Instructions Received By:**  Phone  In Person  Fax  Other

Wire Approved By: \_\_\_\_\_ Wire Input By: \_\_\_\_\_

Wire Verified By: \_\_\_\_\_ OFAC Checked:  Balance Checked:  Time Received: \_\_\_\_\_

OPS 305 (rev 08/07) Wire fees:  AA  Hard Charge Date Received: \_\_\_\_\_