

International Bank of Chicago

OUTGOING WIRE TRANSFER REQUEST

To use this service you must have Wire Transfer Agreement Established with us.
Please sign and fax to: International Bank of Chicago (773)-769-5699

Ref.# _____ (For Bank use) Amount: _____ *Fee: _____ Date: _____

Receiver Bank _____

ABA # _____ Telegraphic name: _____

Address: _____

Beneficiary: _____ Acct.# _____

Address: _____

Beneficiary Bank: _____ Acct./SWIFT/ABA _____

Address: _____

Originator: _____ Acct.# _____

Address: _____

Payment Instruction: _____

Cash: _____ On us check: _____ Debit Memo: _____

Authorization/Customer Signature- If your account requires two signatures, please be sure both signatures appear below. For customer with repetitive wiring agreement in file and fax in the request, please provide access code.

1. _____ 2. _____
Authorized Signature Access Code Authorized Signature

Wire accepted by: _____ Time: _____

Signature & Balance verified by: _____ Available balance: _____

Call Back # _____ By: _____

1st Approval

2nd Approval (If over \$10,000.00)

Fedline Input by: _____ Verified by: _____ Ref. #: _____

Wire originated by: _____ Date: _____ Time: _____

*Wiring fee exception or waive of fee need authorized officer's initial next to the fee amount as the acknowledgement & approval