



International Wire Transfer Application

TO AVOID ANY SIGNIFICANT DELAYS IN THE PROCESSING OF YOUR WIRE, PLEASE MAKE SURE ALL REQUIRED FIELDS ARE COMPLETED. YOU MAY EXPECT ADDITIONAL REQUIREMENT CHANGES DEPENDING ON THE BENEFICIARY COUNTRY LOCATION.

* indicates a required field

ORIGINATOR

*FULL NAME

*ACCOUNT NUMBER

*ACCOUNT TYPE
Please indicate if this is a savings or checking account.

*ADDRESS

*CITY/STATE or PROVINCE

*COUNTRY

*PHONE NUMBER

*E-MAIL

TRANSACTION AMOUNT

TRANSACTION CURRENCY
(Accepted Currencies: AUD, CAD, CHF, CZK, DKK, EUR, GBP, HKD, INR, ILS, JPY, MXN, NOK, NZD, SAR, SEK, SGD, THB, TRY, USD, ZAR)

TRANSACTION AMOUNT

AMOUNT AS *(Select one of the following options)*

- Exact Amount in USD
- Convert USD equivalent to Selected Currency
- Exact Amount in Selected Currency

INTERMEDIARY FINANCIAL INSTITUTION IN USA

NAME	<input type="text"/>
ROUTING NUMBER	<input type="text"/>

BENEFICIARY FINANCIAL INSTITUTION OUTSIDE THE USA

*NAME	<input type="text"/>
ADDRESS	<input type="text"/>
CITY	<input type="text"/>
*COUNTRY	<input type="text"/>
*SWIFT CODE	<input type="text"/>
Transit Code (Canada)	<input type="text"/>
Agency Code (Brazil)	<input type="text"/>
Other Country Code	<input type="text"/>

BENEFICIARY

*FULL NAME	<input type="text"/>
<i>(Please only fill out the fields that apply below)</i>	
ACCOUNT NUMBER	<input type="text"/>
IBAN NUMBER	<input type="text"/>
CLABE (Mexico)	<input type="text"/>
*ADDRESS	<input type="text"/>
*CITY	<input type="text"/>
*COUNTRY	<input type="text"/>

TAX IDENTITY # (CEDULA)
(ID required for outbound transfers to
Colombia, Peru, Guatemala, Venezuela,
Brazil, Chile and Argentina)

Contact Name

Contact Phone Number

Reason for Payment
(Must Be In English)

I authorize IDB-IIC Federal Credit Union to process this wire transfer request and apply the service fee of \$35.00 USD. I understand that if the wire is returned, this fee will not be credited back. For more fees, please refer to the schedule of fees on our website.

By signing I acknowledge that I have read the IDB-IIC Federal Credit Union Wire Transfer Service Agreement and Disclosure and agree to the terms and conditions contained therein. This Agreement can be found on the website and a printed copy can be provided upon request.

*SIGNATURE (Enter Your Full Name) *DATE (MM/DD/YYYY)

INTERNAL

WIRE VERIFICATION _____

WIRE ACCEPTED BY _____ APPROVED BY _____