

## **OUTGOING INTERNATIONAL WIRE TRANSFER CHECKLIST**

This checklist is for informational purposes only and does not represent an actual Wire Transfer Request order. You may choose to complete this checklist in an effort to gather all necessary information to successfully originate an International wire at your nearest Georgia's Own Credit Union branch. This is not an official form. An official form/print receipt will be produced for review and signature approval at the branch location you choose.

Due to regulatory and disclosure requirements, international wire requests must be completed in person and cannot be accepted after the **3:00 p.m.** daily processing time cutoff for the next business day.

1)	International Wire Currency Selection:				
	Currency:	USD 🗌	FX If FX (Foreign Curre	ency), list desired currency:	
	Calculation only if FX box is checked and currency is listed above: (If USD checked, skip to section 2)				
	a.   FX - The debit will be the calculated USD Equivalent and the FX amount sent will be the amount listed in the field below.				
	<ul> <li>OR</li> <li>b. USD Equivalent - The debit will be the amount listed in the field below and the FX amount sent will be the calculation.</li> </ul>				
2)	Wire Origination	Instructions:			
	Amount:	\$			
	Account #:				
	Contact #s:		Home:		
5)	(If yes, we will set up a notification profile to the email address on file for the account facilitating the wire request)  Receiving FI will default to our preferred processor, Convera unless you provide another FI.				
٥,	Enter your receiving FI only if using another FI as provided by the beneficiary instead of Western Union:				
	_			nber:	
٥,	Address:  Beneficiary FI Information: (The international FI used by the beneficiary)				
6)	_	,	•		(SWIFT BIG Fts.)
				nber:	(SWIF1, BIC, Etc.)
	Address:				
7)	Beneficiary Infor	mation: (Person	or business name on account whe	ere funds are being deposited)	
	Name: Country:				
	Account #:			(IDAN, CLADE, Hallsit Code, Etc.)	
	Account #: Address:				
ß۱	Address:				
8)	Address:				
·	Address: Optional Special	Instructions: (	Originator to Beneficiary instruction		dated.

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