



CHIPPEWA VALLEY BANK

Wire Transfer Request

Beneficiary (Receiver) Information

Routing # or Swift Code: _____

Name of Bank or Credit Union: _____

Address of Bank or CU: _____

Dollar Amount \$ _____

Name or Business: _____

Account # _____ SS or EIN# _____

Address: _____

Additional Information: _____

Originator (Sender) Information

Name or Business: _____

Account # _____ SS or EIN# _____

Address: _____

Reason For Wire/Purpose Of Payment: _____

The above information is true and correct to the best of my knowledge. I understand the receiving bank may apply funds based on the account number alone, whether correct or incorrect, and that I am liable for any incorrect information provided.

Originator Signature: _____ Date: _____

Office Use Only

OFAC Check	Callback to:
Risk Assessment	Funds Availability Checked
CIP (non-customer)	TMS or Tickets
Prepared By:	Wire Fee