## WIRE TRANSFER APPLICATION UNIBANK

Wire Amount :\$		Fee: \$	Total Amo	ount : \$	Customer   Non-customer
Branch: □ 01 □ 02			•	00 only for non-customer)	1 D'1D
04 05	□ 06 W	/ire # :	Date Rece	eived:/Time Received	1:: Received By:
	Name:				Purpose of Transfer:
:: ORIGINATOR/	Address:				
SENDER INFORMATION				Zip:	
송금인	Phone Nu	ımber : (	)		
<u> </u>	For Non-Customer Only (Two pieces of ID)				
	DOB:/ SSN:				Source of Funds :
	ID Type:	□ DL □ Passp			
	Issued by	:		Exp.Date://	
	2 <sup>nd</sup> ID Typ	pe:		_ Exp.Date:/	
	Name:				
:: BENEFICIARY INFORMATION	ENEFICIARY Beneficiary Address:				Intermediary Bank Info.
수취인	Beneficiary Phone No. :( )				
	Beneficiary Bank :				
	ABA/Routing No. (US Only)				SWIFT:
	Account No.:				
	Reference:				
TO THE CUSTOMER: A wire transfer relies on the destination information provided by you. UniBank accepts no liability if there is a loss resulting from incorrect information that you have provided. Additional fees may be deducted for a trace by UniBank (if you request a trace). All transactions are subject to possible restrictions under U.S. Treasury Office of Foreign Assets Control Regulations. International wires can be a high risk to some countries. UniBank will not be responsible for any losses that can or may occur during these transactions, unless the error was on our part.					
X Date					
Customer Signature					
Administrative Us	e Only:				
Request By:		Method of Payment :         OFAC:		OFAC:	
Wire Transfer Agreement : ☐ Yes ☐ No		□ #1207 □ #1203		Initiator:	
			iBank Account No	O. Verifier:	
Call Back / Confirmed By:		Verified Funds By: Approved By:			
		MTE By:	E By: Date Sent:		