

# Sanborn Savings Bank

Member FDIC

## Wire Transfer Authorization Request

### Receiving Financial Institution Information

**Routing #** \_\_\_\_\_

**Name of Financial Institution:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Transfer Amount \$** \_\_\_\_\_

### Beneficiary (Receiver) Information

**Name or Business:** \_\_\_\_\_

**Account #:** \_\_\_\_\_

**Account Type:** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**Additional Information:** \_\_\_\_\_

### Originator (Sender) Information

**Name or Business:** \_\_\_\_\_

**Account #:** \_\_\_\_\_

**Phone #** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**Reason for Wire/Purpose of Payment:** \_\_\_\_\_

### Authorization

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

Prepared by: \_\_\_\_\_

OFAC Check: \_\_\_\_\_

Verified by: \_\_\_\_\_

If fax, email, or phone request – call back made  
to customer: Yes \_\_\_\_\_ No \_\_\_\_\_

By employee: \_\_\_\_\_