



## WIRE TRANSFER REQUEST

7054 Jefferson Hwy, Suite 100  
Baton Rouge, LA 70806  
P: 225.465.4700  
F: 225.465.7402  
wires@ccombank.com  
(secured email only)

I authorize Currency Bank (Bank) to make a one-time electronic wire transfer of funds from my deposit account with the Bank to the beneficiary's account identified below.

**Please complete the information below to authorize a written wire transfer request. An incomplete form will delay processing.**

### PART 1: Originator (Sender) Information

|                            |                                                          |          |           |
|----------------------------|----------------------------------------------------------|----------|-----------|
| Customer Name:             | Customer Account Number<br>to Debit Wire and Fee Amount: |          |           |
| Customer Physical Address: |                                                          |          |           |
| City:                      | State:                                                   | Country: | Zip Code: |

### PART 2: Beneficiary (Recipient) Information

|                                    |                                                                                                        |          |           |
|------------------------------------|--------------------------------------------------------------------------------------------------------|----------|-----------|
| Beneficiary Name:                  | Beneficiary Account Number:                                                                            |          |           |
| Beneficiary Address:               |                                                                                                        |          |           |
| City:                              | State:                                                                                                 | Country: | Zip Code: |
| Beneficiary Bank Name:             | ABA Routing Number or SWIFT: (Please verify<br>ABA # is valid for wire transfer with beneficiary bank) |          |           |
| Beneficiary Bank Physical Address: |                                                                                                        |          |           |
| City:                              | State:                                                                                                 | Country: | Zip Code: |
| Your Reference (if any):           |                                                                                                        |          |           |

### PART 3: Amount of Wire Transfer

|                    |                                                                                     |
|--------------------|-------------------------------------------------------------------------------------|
| Amount of Wire: \$ | Purpose of Wire: (Please include specific<br>reason for the wire transfer request)* |
|--------------------|-------------------------------------------------------------------------------------|

\* Completion of the "Purpose of Wire" section is mandatory. Provide a brief, specific description of the purpose of the money transfer. The Bank has a responsibility to understand each customer's transactions to determine if a transfer fits the customer's profile. If no apparent purpose is provided or is unclear the Bank's Wire Transfer Department may contact the customer for additional information.

### PART 4: Customer's Signature and Call-Back Number

|                                         |                                                         |
|-----------------------------------------|---------------------------------------------------------|
| Signature of Authorized Account Signer: | Date:<br>(mm/dd/yyyy)                                   |
| Print Name:                             | Telephone Number on File<br>for Call Back Verification: |

**Please note:** Callback verification is required prior to processing the wire (if applicable). For commercial accounts, a Wire Transfer Agreement and Signature Card/Application must be on file, and Caller ID/PIN Identification must be provided during the callback verification. For consumer accounts, a Signature Card/Application must be on file and customer identification must be validated during the callback verification. The Customer takes full responsibility and assumes any and all liability for unauthorized account access, identity theft and/or fraud.

Please **email encrypted, mail or fax** this completed form to: Currency Bank  
Attn: Wire Transfer Department, 7054 Jefferson Hwy Suite 100, Baton Rouge, LA 70806; Fax: 225-465-7402, wires@ccombank.com

### FOR BANK USE ONLY

|                                          |                                                  |
|------------------------------------------|--------------------------------------------------|
| Date Account Opened: _____               | Callback Verification Date: _____                |
| Account Status: _____                    | Callback Verification Time: _____                |
| Available Collected Balance: _____       | Callback Telephone Number: _____                 |
| <u>Initial below</u>                     | Employee Verification by: _____                  |
| Signature Card Verified: _____           | Wire Transfer Entered by: _____                  |
| Wire Transfer Agreement Verified: _____  | Wire Transfer Verified by: _____                 |
| Customer's Authorized Rep.: _____        | <b>Wire Approval Signature:</b> _____            |
| Purpose of Wire Verified: _____          | <b>Exception Approval</b> (if applicable): _____ |
| Telephone Number on File Verified: _____ | <b>Date Processed:</b> _____                     |