



Wire Transfer - International

NOTICE REGARDING WIRE TRANSFERS

If you give HOCU a payment order which identifies the beneficiary (recipient of the funds) by both name and identifying or account number, payment may be made by the beneficiary's bank on the basis of the identifying or bank account number, even if the number identifies a person different than the named beneficiary.

The wiring instructions are as follows:

AMOUNT (U.S or Foreign): _____

PURPOSE: _____

INSTITUTION: _____

CITY, STATE: _____

SWIFT/BIC CODE: _____

FURTHER CREDIT TO:
(If applicable) _____

ACCOUNT NO.:
(If applicable) _____

FINAL CREDIT TO: _____

BENEFICIARY ADDRESS: _____
Street Address City, State, Zip Code

ACCOUNT NO./IBAN: _____

I authorize this wire specified above from the available funds in my Savings/Checking account with a service fee of \$45.00 for Domestic wires.

This notification is to inform you that engaging in Unlawful Internet Gambling or any other illegal activity is prohibited. You agree that you are not engaged in Unlawful Internet Gambling or any other illegal activity and will not use any of your accounts or wire transfer services for such purposes. We may deny your wire transfer request, or terminate your account relationship, if you engage in Unlawful Internet Gambling or other illegal activity.

By signing below, you agree that the information above is correct and accurate; certify that this wire transfer is not for the purposes of Internet Gambling or any other illegal activity; and you acknowledge receipt of the Wire Transfer Agreement.

MEMBER SIGNATURE	ACCOUNT No./ Suffix	DAYTIME PHONE NUMBER	DATE/ TIME RECEIVED
MEMBER NAME (PRINT)	MEMBER STREET ADDRESS		CITY, STATE, ZIP Code

FOR OFFICE USE ONLY:

REC'D BY: Teller#/ Initials /	DATE and TIME REC'D: @
OFAC VERIFIED BY: Teller#/ Initials /	
<input type="checkbox"/> Beneficiary Name(s) <input type="checkbox"/> Beneficiary Addresses (including country for foreign addresses)	
<input type="checkbox"/> Receiving Financial Institution Name and/or Company Name	
<input type="checkbox"/> Intermediary Financial Institution Name and/or Company Name (if applicable)	
EFFECTIVE DATE:	TX PROCESSED BY: Teller#/ Initials /
CATALYST / TRANZACT WEBSITE	SUBMITTED/APPROVED BY: Teller#/Initials
WIRE ENTERED BY: Teller#/ Initials /	