



OUTGOING WIRE TRANSFER AUTHORIZATION

Date: _____ Account Number: _____ Available Balance in Account: \$ _____

Checked By: [] Verified By: []

Wire Amount: \$ _____

Wire Transfer Fee: [] \$25.00 Domestic [] \$45.00 International

[] No Holds Present

Total USD* Deducted from Account: \$ _____

International Wire Only: [] USD* [] Foreign Currency** _____

* U.S. Dollar. **Appropriate Foreign Currency must be indicated. If selected, "Total USD Amount Deducted from Above Account" will be taken as U.S. Dollars and equivalent foreign currency, based on current exchange rates, will be sent to Beneficiary. If a fixed amount of foreign currency is to be wired to Beneficiary and "Total USD Amount Deducted from Above Account" is an estimate, notify McFarland State Bank immediately.

Purpose of Wire Required:

[]

Sender/Originator:

5000 _____

Address: _____

Intermediary Bank:

(1st Bank Receiving Funds) 4000

ROUTING #/SWIFT CODE []

Intermediary Bank Address:

[]

Beneficiary Bank:

(Final Bank Receiving Funds) 4100

ROUTING #/SWIFT CODE []

Beneficiary Bank Address:

[]

Beneficiary:

(Name of Account Owner Receiving Funds) 4200

Beneficiary Account Number []

Beneficiary Address:

[]

Special Instructions:

6000 []

I have verified the above transfer instruction and agree that they are correct. I authorize McFarland State Bank to conduct this transfer and complete the transfer as so directed. I agree to indemnify and hold McFarland State Bank harmless from and against any and all liability, loss, damages, cost, expense, or other amount in connection with such wire transfer. Should there be an error in the transfer, I shall notify the bank before the end of the next business day following the transfer. McFarland State Bank shall be released for any mistakes or errors resulting from incorrect information provided by the transferor, or any errors caused by any depository intermediary bank.

Signature: _____

Date: _____

SEND COMPLETED FORMS TO MCFARLAND STATE BANK BY SECURE E-MAIL AT https://www.msbonline.com/secure-email TO wires@msbonline.com

For Internal Use Only

Method of Client Identification:

- [] Known Client [] Internal Wire [] Photo ID [] Other (Explain): _____

Wire Received:

- [] In Person [] Email [] Fax

Call Back: Wires received by fax/email must be confirmed by Phone. Wires NOT accepted by Phone

Spoke with: _____ at _____ [] AM [] PM

TMS Entered By: _____

Form Completed By: _____