

Navy Federal® Request for an International Wire Transfer

| For Office Use Only | |
|---------------------|--|
| Access No. | |
| Account No. | |

Funds are generally received at the other financial institution within five to seven business days. Additional fees may be assessed by the receiving financial institution.

Please note:

The sender has the right to cancel a wire no later than 30 minutes after requesting the payment to receive a full refund plus fees. If the request is after 30 minutes, Navy Federal will submit a reversal request to the payee's financial institution and make every attempt to retrieve the funds; however, there is no guarantee that the funds will be returned. Once received by the payee and/or payee's financial institution, the reversal of the wire is at the discretion of the payee's financial institution. Navy Federal cannot guarantee the response time of the payee's financial institution, and fees may be assessed by other financial institutions if the reversal request is successful.

| A. Member Information | | | |
|-----------------------|--|-----------------|-----------------|
| Name: First | MI | Last | Suffix |
| Best Contact Number | <input type="checkbox"/> Business <input type="checkbox"/> Home <input type="checkbox"/> Cell | Account Number* | Date (MM/DD/YY) |

| B. Payment Type Information | | | |
|-----------------------------|--------------------------------|---|--|
| Transfer Amount \$ | Delivery Fee \$25.00 | <input type="checkbox"/> Foreign Currency <input type="checkbox"/> USD | Requester Information <input type="checkbox"/> Member <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Other _____ |

| C. Financial Institution Information | | | |
|---------------------------------------|---------|--|-----------------------------|
| Name of Payee's Financial Institution | | BIC | National ID (if applicable) |
| Address: City | Country | Name of Primary Correspondent Bank WELLS FARGO** | |
| Intermediary Financial Institution | | | |
| Address | City | State/Province | Postal Code |

| D. Payee's Information | | | | |
|--|------|-------|----------|---|
| Name: First | MI | Last | Suffix | Is Payee a Third Party? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Payee Address: Street | City | State | Zip Code | Country |
| Payee Account Number or IBAN/CLABE (if applicable) | | | | |
| Purpose of Payment | | | | |
| Remarks (additional wiring instructions) | | | | |

| | |
|---------------------------------------|-----------------|
| Requester's Signature (if applicable) | Date (MM/DD/YY) |
|---------------------------------------|-----------------|

| E. For Office Use Only | | | | |
|------------------------|-----------------|-----------------|------------------------------|--------------------------------|
| Employee Initials | Employee Number | Date (MM/DD/YY) | Member provided Pre-Receipt? | Member provided Final Receipt? |

*This is the account that the funds will be withdrawn from.

**Wells Fargo is the correspondent bank we use to purchase foreign currency.

