The Bank of South Carolina

Foreign Wire Transfer Request

Date	Request Type: Person] I	Email Phone Letter
Time	Notification Type: Email A	ddr	ess:
	Telephone Number:		
Customer Name (Originator)**			
Originator's Account Number SSN or EIN			
SSN or EINStreet Address			
Telephone Number			
Account Title			
Memo- Available Balance \$			
Foreign Amount	U. S. Dollar Amount	\$	
Foreign Currency	Fee Amount	\$	50.00
By Order Of: **			
Beneficiary Bank Name: **			
Beneficiary Bank Street Address:			
Beneficiary Bank City & Country:			
Beneficiary Bank Assount Number:			
Beneficiary Bank Account Number: Sort Code:			_
Beneficiary Name: **			
Beneficiary Account #/ IBAN #:			
Beneficiary Street Address:			
Beneficiary City & Country:			_
Special Instructions: **			
Only Complete if Intermediary Bank is requested			
Intermediary Bank Name: **			
Intermediary Bank ABA # (Routing Number):			
Intermediary Bank Account #:			
Intermediary Bank SWIFT/BIC			
Intermediary Bank Street Address:			
Intermediary Bank City & State:			
Initials OFAC List Reviewed (**)			THE CUSTOMER ACKNOWLEDGES ED HEREIN IS CORRECT.
Authorization to send wire has been verified		ATIVI	ED HEREIN IS CORRECT.
	Cus	ton	ner's Signature
Customer/Originator must be verified in Navigator as an own	ner or authorized on a Money Transfer Au	ıthor	rization and Agreement Form.
Bank Personnel Preparing Wire:			