

OUTGOING WIRE TRANSFERS

Amount:			Wire Charge	2:
Receiver				Routing Number
Bank:				Name
		Routing Numbe	r OR	Account Number
Intermediary Bank:		nouting runne		Name
				Address Line 1
				Address Line 2
(further credit)				Address Line 3
				, 10 th 650 Line C
				Account Number
Popoficiary				Name
Beneficiary:				Address Line 1
(final credit)				Address Line 2
				Address Line 3
				Account Number
Originator:				Name
				Address Line 1
				Address Line 2
				Address Line 3
Beneficiary				
Information:				
		NOTICE		
Fedwire may be used to complete this transfer. Fedwire transactions are governed by Regulation J. If your payment order identifies the beneficiary (recipient of the funds) both by name and identifying				
account number, payment may be made by the beneficiary's financial institution on the basis of an identifying or account number, even if the number identifies someone other than the named beneficiary. If your payment order identifies an intermediary or beneficiary's financial institution by both name and an identifying number, a receiving financial institution may rely on the number as the proper				
	nn institution other than the named fin the interest rate payable on the accoun			r applicable state or federal funds transfer law to pay you interest, ide.
I unconditionally authorize First National Bank of Bosque County to execute this payment order and debit my account in the amount requested plus applicable charges. I request payment to be made to the beneficiary or account number named above. To the extent not prohibited by law, I agree that this wire transfer is irrevocable and that the sole obligation of First National Bank of Bosque County is to exercise ordinary care in processing this wire transfer and that it is not responsible for any losses or delays which occur as a result of any other party's involvement in processing this transfer. I have				
read and understand the notice re	garding wire transfers.			
Sender's Signature			 Date	
Jale Date				
FOR BANK USE ONLY				
☐ Available Collecte	ed Balance 📮 OFA	C (check before send		og in database
Officer Verification:		Second Off	icer Verification:	