River City Domestic Outgoing Wire Transfer Form (CTR)

Amount: \$		Wire to be sent on (date):	
<u>Receiver FI</u>	ABA #:	Receiving Bank Name:	
Beneficiary FI	BFI ID:	Intermediary FI	IFI ID:
	BFI Name:	Only	IFI Name:
	BFI Addr:	if appl	IFI Addr:
Originator R	CB Acct # to Debit:	RCB Customer	Name:
Physical Addres	s (City St Zip):		
Beneficiary Bank Code (indicate type of acct the funds are wired toDDA, LOAN, or OTHER):			
Account # to	Credit:	Name:	
Physical Address (City St Zip):			
Ref for Beneficiary / FFC (EX: name, invoice #, acct#):			
Originator to BNF Info / Notes (message to receiver):			
Customer Signatu	re	Date Requested	Time
Bank Use Only			
		Bank Use Only	
Email Co	onfirmation requested: YES 🗌 NO 🗌		
	-		
	w/ Cash Deposits? YES NO	If yes, include email: If yes, attach supporting docs) 	Fee Waiver approval:
Funded Employee Signatu	w/ Cash Deposits? YES NO	If yes, include email: If yes, attach supporting docs) 	Fee Waiver approval:
Funded Employee Signatu	w/ Cash Deposits? YES NO	If yes, include email: If yes, attach supporting docs) Additional Authorizing Si 	Fee Waiver approval: ignature (if appl) Operations Dept Use Only
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