

Domestic Wire Request Form



Processing Date:	Transfer Amount: \$
Fee: \$20.00 ☐ Charge ☐ Analyze ☐ Waiver on File ☐ One Time Waive _____ (Requires Approver Initials*)	
Originator Information:	
Name:	Account Number:
Physical Address:	
Receiving Bank Information:	
Name:	ABA Number:
Physical Address:	
Beneficiary Information:	
Name:	Account Number:
Physical Address:	
Originator to Beneficiary Notes (Optional, 140-character limit):	
Purpose of Wire:	

Customer Signature:

I unconditionally authorize Mountain Pacific Bank to execute this payment order on my behalf. In addition, I authorize Mountain Pacific Bank to debit my account in the amount requested plus applicable charges if other payment arrangements haven't been made.

Signature & Title (if applicable)

Date

Customer Not Present:

Customer Verification Method: ☐ Password ☐ Two pieces of CIP data ☐ Wire Password	
Employee performing call back:	Customer who verified wire:
Wire Transfer Agreement on file? ☐ Yes ☐ No – Policy Exception Approval By*: _____ Name and Title. Include supporting documents.	
Date of call back:	Time of call back:

Bank Use Only:

OFAC Search Performed By: _____ ☐ N/A Internal		OFAC Possible Matches? ☐ No ☐ Yes - Requires resolution with BSA Dept. before proceeding	
iCore Entry and Balance Verification By:	Date:	iCore Approval and Balance Verification By:	Date:
Correspondent Bank Entry By:	Date:	Correspondent Bank Approval By:	Date:

*Refer to Approval Authority sheet for authorized approvers and approval limits.