

## Wire Transfer Request

*The undersigned originator requests payment to be made to the beneficiary and account number named below. The undersigned agrees that this wire transfer is irrevocable and that the sole obligation of US Metro Bank 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. The originator states that these funds are being sent to a person, entity or country that is NOT restricted from doing business with a person subject to the jurisdiction of the United States.*

<b>Date:</b>	<b>Wire Amount: \$</b> 송금액	<b>Fee: \$ 30.00</b> 수수료		<b>Total Received: \$</b>
<b>Method of Payment</b>	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Debit Acct:  <input type="checkbox"/> Other:	<b>Faxed Application:</b> Yes <input type="checkbox"/> <b>Fax Agreement on File:</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Verification Application</b> Name: _____ Verified by: _____ Time: _____	<b>Purpose of Wire:</b>
<b>Customer (Originator) Information</b> 고객/송금인	<b>Name:</b> 이름			<b>Account No:</b>
	<b>Address:</b> 주소			<b>Telephone:</b>
<b>Beneficiary Bank Information</b> 수취 은행	<b>Name:</b> 이름			
	<b>Address:</b> 주소			
	<b>City:</b> 도시	<b>Country:</b> 국가		<b>ABA No or SWIFT Code</b>
<b>Beneficiary (Payee) Information</b> 수취인	<b>Name:</b> 이름			<b>Telephone:</b>
	<b>Account No:</b> 구좌번호			
	<b>Address:</b> 주소			
<b>Intermediary Bank Information</b> 중계 은행	<b>Name:</b> 이름			
	<b>Address:</b> 주소			
	<b>City:</b> 도시	<b>Country:</b> 국가		<b>ABA No:</b>
<b>Special Instructions</b> 특별 지시사항				
<b>Non-Customer Identification:</b>				
<b>ID Type:</b> <input type="checkbox"/> Driver's License <span style="margin-left: 200px;"><input type="checkbox"/> ID Number: _____</span> <input type="checkbox"/> Passport <span style="margin-left: 150px;"><input type="checkbox"/> Expiration Date: _____</span> <input type="checkbox"/> Other _____ <span style="margin-left: 150px;"><input type="checkbox"/> SSN: _____</span>				
By signing below, you confirm that you have verified the information set forth above, have read and agree to the <i>Wire Transfer Agreement and Terms</i> set forth on the reverse side.				
Customer Signature (서명): _____			Date: _____	
<b>BRANCH OR DEPARTMENT</b>				
Accepted By: _____		Signature Verified By: _____		<b>OFAC:</b> Originator _____ Beneficiary _____ Beneficiary Bank _____ Intermediary Bank _____
Approved By: _____		Account (Funds) Debited By: _____		
<b>WIRE DEPARTMENT</b>				
Date Sent: _____	Entered By: _____	Verified By: _____	Approved By: _____	
<b>*Two (2) Approvers Required for Over \$250,000</b>				