

DOMESTIC WIRE TRANSFER REQUEST FORM

DATE: _____

FROM OFFICE: _____ TELLER: _____

CUSTOMER'S NAME: _____

ADDRESS: _____

DAYTIME PH NO. _____

CUSTOMER'S ACCOUNT # DEBITED: _____

WIRE INSTRUCTIONS

AMOUNT _____ + \$15.00 Fee

(FRB 1000001000 Amount of Wire Wire Fee 4800601000 \$15.00)

BENEFICIARY BANK _____

ADDRESS _____

CITY, STATE & ZIP _____

BANK ABA # _____

CREDIT ACCOUNT NAME _____

ADDRESS _____

CITY, STATE, & ZIP _____

CREDIT ACCT# _____

FINAL CREDIT ACCOUNT NAME _____

(If applicable)

FINAL CREDIT ACCOUNT # _____

(If applicable)

REFERENCE _____

By signing below, I certify the information listed is accurate and complete. I authorize Hometown Bank to process this transaction based on the information provided.

BY ORDER OF _____ Date _____

(CUSTOMER'S SIGNATURE)