|  |  |
| --- | --- |
| **Required Information** |  |
| 1. Amount and Currency you are requesting |  |
| 2. Ultimate Beneficiary  **Name** |  |
| 3. Ultimate Beneficiary  **Place (city and country) and date of birth** |  |
| 4. Ultimate Beneficiary  **Codice Fiscale** (For Italian citizens only) |  |
| 4. Ultimate Beneficiary  **Home address** |  |
| 3. Ultimate Beneficiary  **Bank Account Number** |  |
| 4. Ultimate Beneficiary  **Bank Name, Address** |  |
| 5. SWIFT or BIC |  |
| 6. IBAN |  |
| 7. Routing number (for USA only) |  |
| 10. Additional Info |  |
| DATE | SIGNATURE |