

**TRANSFER REQUEST  
EXTERNAL TRANSFER**



**SECTION I CLIENT INFORMATION**

Names and surnames/Company name	Account number
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**SECTION II TRANSFER INFORMATION**

Amount to be transferred	Amount in letters
Currency: USD <input type="checkbox"/> EURO <input type="checkbox"/>	Reason for transfer

**SECTION III INFORMATION OF INTERMEDIARY BANK (IF APPLICABLE)**

Name	Address		
City	Country	SWIFT	ABA

**SECTION IV INFORMATION OF BENEFICIARY BANK**

Name	Account number of beneficiary bank		
Address			
City	Country	SWIFT	ABA

**SECTION V INFORMATION OF BENEFICIARY**

Names and surnames/Company name	Address
City	State/Province
Country	Account number of client/ For future credit to (FFC)/ IBAN

**SECTION VI DISCLOSURES**

The undersigned, as a client of Banco San Juan Internacional, Inc. ("Bank"), HEREBY STATE under oath that I agree with the information presented above on this form and that said funds originate and shall be used for legal activities, and that the information given on this form is true. I understand it is my responsibility to immediately inform the Bank of any type of change which arises in the information given above. Likewise, I certify my responsibility for the use of the funds managed under my name, knowing that they are subject to all laws and regulations imposed by federal laws of the United States and its territories, as well as the laws of your country. I also understand that all participant banks may use this information to adequately identify the parties involved. The Bank shall not be liable for losses, incorrect credits, or penalties when the information provided by the client or the bank issuing the transfer is incorrect or invalid. I authorize Banco San Juan Internacional, Inc. to debit my account for the amount to be transferred plus the service charge corresponding to this transaction.

Names and surnames	Signature	<input type="text"/>
		Date (mm/dd/yyyy)

**SECTION VII FOR INTERNAL USE**

**Reviewed by:**

Names and surnames of back office officer	Signature	<input type="text"/>
		Date (mm/dd/yyyy)

**Approved by:**

Names and surnames of compliance officer	Signature	<input type="text"/>
		Date (mm/dd/yyyy)