

		Date:		Amount:		Amount of Fee Collected:			
Originator's Name:									
Address:									
Phone Number:		Account #		Tax Id					
Beneficiary's Correspondent / Intermediary Bank (further credit)						ABA:			
Address:									
Swift Code:		Account No.							
Receiver / Beneficiary Bank:						ABA:			
Address:						Swift Code:			
** IFSC Code: Required field for India		Account No.							
Beneficiary Name:									
Address:									
Phone Number:		Account No.							
Additional Instructions:									
** Purpose of Transaction Required field for India & United Arab									
<p>The undersigned originator request payment to be made to the beneficiary or account number named above. To the extent permitted by law, the undersigned Originator agrees that this wire transfer is irrevocable and that the sole obligation of the financial institution named above is to act in good faith and with reasonable care in processing this wire transfer and that it is not responsible for any losses or delays which may occur as a result of any other party's involvement in processing this transfer.</p>									
Customer's Signature: _____		Date: _____		Acct Chgd: _____					
Phone or Fax request Verify By _____		Phone # used for verification _____		Contact Person Name _____					
Received By: _____		Date: _____		Time: _____					
		Authorized Bank Personnel							
Initiated By: _____		Verified By: _____		(Officer of Indus American Bank)					
OFAC will be verified by _____									