

Foreign Draft Order



(Minimum of \$100.00 USD)

**To Branch Personnel and Customers:
Please type all information given on this form.**

Date: _____

Branch & Number: _____ **Accepted By:** _____

Foreign Amount: _____ **Rate:** _____
(Use Wire/Draft Rate Sheet)

USD Equivalent: _____

Fee: _____

Total: _____

Payee Information: _____

For Euro Draft – Please select the country where the draft will be mailed to:

- | | | | |
|-------------------------------------|--------------------------------------|---|---------------------------------|
| <input type="checkbox"/> Austria | <input type="checkbox"/> Belgium | <input type="checkbox"/> Finland | <input type="checkbox"/> France |
| <input type="checkbox"/> Germany | <input type="checkbox"/> Greece | <input type="checkbox"/> Ireland/Republic | <input type="checkbox"/> Italy |
| <input type="checkbox"/> Luxembourg | <input type="checkbox"/> Netherlands | <input type="checkbox"/> Portugal | <input type="checkbox"/> Spain |

Purchaser's Information:

Name: _____ **Phone Number:** _____

Address: _____

Signature: _____

(Your signature verifies the payee information given above is correct)

***** Special Instructions:**