

INTERNATIONAL WIRE TRANSFER AUTHORIZATION FORM

Subject to Foreign Wire Disclosures

For retirement distributions, please include the appropriate distribution form.

Account Number: _____

Account Title: _____

CONTACT INFORMATION FOR DELIVERY OF SAME DAY DISCLOSURE (Required for all accounts owned by a natural person i.e. where client can be reached in the next hour.)

Client Fax or Email: _____ Client Phone Number: _____

TRANSACTION INSTRUCTIONS (Select **one** option per form. For retirement accounts, this must be the amount after withholding.)

- | | |
|--|---|
| <input type="checkbox"/> U.S. Dollar Wire Request (Check here if the recipient is to receive U.S. dollars.)
Amount to be wired from your account: \$ _____ | <input type="checkbox"/> One-Time (default) |
| <input type="checkbox"/> Foreign Currency Request (Check here if the recipient is to receive foreign currency.)
Amount to be wired from your account: _____ Currency: _____ | <input type="checkbox"/> Standing Instructions* |
| <input type="checkbox"/> Standing Instructions * for various amounts
Specify amount not to exceed (per transaction): _____ Specify Currency: _____ | <input type="checkbox"/> One-Time (default) |
| | <input type="checkbox"/> Standing Instructions* |

Note: The recipient may receive less than the stated requested amount due to fees charged by the recipient's bank and foreign taxes.

INTERNATIONAL WIRE INSTRUCTIONS (All fields are required unless otherwise noted. *Optional; **If applicable.)

Bank Country: _____ SWIFT Code (8 or 11 digits): _____

Foreign Bank Name: _____

Street Address*: _____

City: _____ Country Specific Routing Number**: _____

Intermediary ABA/SWIFT**: _____ Intermediary Bank Name**: _____

Beneficiary Bank Account Title: _____

Beneficiary Account Number/IBAN/CLABE: _____

(IBAN is required in EU, United Kingdom, Israel, Norway, Switzerland, Costa Rica and the Dominican Republic; CLABE is 18 digits and required in Mexico.)

Country of Beneficiary: _____

Address of Beneficiary: _____

Purpose of Transaction: _____

Additional Payment Instructions (e.g. references, to the attention of, for further credit, phone number, etc.): _____

Please verify that the recipient information is correct. **Providing the incorrect account number, recipient institution identifier or other incorrect recipient information could result in the sender losing the transfer amount.**

CLIENT SIGNATURES

By signing below, each of the undersigned represents and warrants that each of the undersigned has received, read and agreed to the second page of this disclosure and that the undersigned is/are the primary account owner(s), holder(s), trustee(s), executor(s), and/or authorized agent(s) for any RBC Capital Markets, LLC ("RBC CM") account(s) with the account title specified at the top of this form, and each of the undersigned agrees to hold harmless RBC CM for following the above instructions. If the RBC CM account is a trust, UTMA/UGMA, guardianship, conservatorship, or other account created for the benefit of a third party, I/we represent that all transactions effected hereunder are and will be for the benefit of the beneficiary of the RBC CM account as required by applicable law.

If this account is owned by a natural person, I/we have received, read and agreed to the terms on the second page of this form and I/we understand that I/we am/are required to receive certain disclosures prior to completing any transaction.

If I we/ have selected Standing Instructions, authorized persons are permitted to transfer money per the above wire instructions on the basis of oral instructions, including instructions provided solely over the telephone. For accounts owned by a natural person, I/we may need to provide additional contact information for delivery of same day disclosures if my/our contact information has changed.

Client Signature Client Name (please print) Date

Client Signature Client Name (please print) Date



**Correspondent
Services**

RBC Correspondent Services, a division of RBC Capital Markets, LLC, Member NYSE/FINRA/SIPC.

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Account Number: _____

Account Title: _____

FOR ALL NATURAL PERSON ACCOUNTS SUBJECT TO FOREIGN WIRE DISCLOSURES

I understand that prior to completing this international wire transfer, RBC Capital Markets, LLC (“RBC CM”) will deliver certain disclosures to me, which will include the exchange rate applied to this transfer (if the transfer involves a currency exchange) and certain other charges, taxes and fees that apply to this wire transfer. I understand that I will be responsible for all taxes, fees and other charges listed in the disclosure. Pursuant to federal regulations, RBC CM cannot complete the transfer until I have acknowledged receipt of the disclosure and have consented to the terms.

The disclosure will be delivered to the email or fax number listed above and I understand that I must be able to access the disclosure and to provide my consent (which may be provided verbally) within the time frame as designated by RBC CM. If I am unable to provide my timely consent in the required time frame, RBC CM will cancel the transaction.

I consent to receive communications related to this international wire transfer electronically via email or fax at the address or number listed above. These communications include any disclosures, receipts, proofs of payment, or other notices or communications required by the rules and regulations of the Consumer Financial Protection Bureau or other applicable rules.

I agree:

- To download or print any electronic communications for my records; and
- That if I have chosen fax communications, the designated fax machine or other fax compatible device is able to receive fax transmissions at the number provided; and
- That if I have chosen email communications, I can receive emails at the address provided, and will access the emails via a device with the ability to read secure email; and
- That I am providing my consent to receive electronic communications pursuant to the Electronic Signatures in Global and National Commerce Act and intend that this statute apply to the fullest extent possible.

I can withdraw my consent to receive electronic disclosures by contacting my financial professional. Withdrawing my consent will not affect the validity of disclosures previously provided.

I agree to indemnify and hold RBC CM, its successors, affiliates, assigns, officers, directors, agents and employees (the “Indemnified Parties”) harmless from, and to pay the Indemnified Parties promptly on demand, any and all losses, liabilities, damages, claims, costs or expenses (including attorneys’ fees and expenses) incurred by the Indemnified Parties in connection with their reliance on the instructions contained herein. These indemnification provisions are in addition to (and in no way limit or restrict) any rights which any of the Indemnified Parties may have under any other agreement(s) between the undersigned and any of the Indemnified Parties or under any federal or state statutes, laws, rules or regulations.

CORRESPONDENT FIRM ATTESTATION

In order to be processed, this request form must be signed by a Firm Authorized Signer. The Firm will indemnify RBC CS for any loss, cost, damage or expense arising from or related to the breach of any of the Firm’s representations, warranties and agreements contained herein. Unless the client’s signature is notarized, the undersigned Firm Authorized Signer hereby represents and warrants that the signature(s) of the person(s) signing above on behalf of the account is/are genuine and that such signer(s) is/are an authorized party with the capacity and authority to bind the account.

The Firm further agrees that for any transfer where applicable regulations or RBC CM procedures require delivery of a predisclosure notice, the Firm will not submit final wire transfer instructions to RBC CM unless the Firm has confirmed with the client that the client has received the disclosures and consented to the terms therein. In the event that the client indicates an intent to revoke the consent, the Firm will immediately notify RBC CM of such revocation. The Firm will immediately deliver the proof of payment or any other post-transaction notices required by applicable regulations or RBC CM procedures.

Firm Authorized Signer (please print)

Firm Authorized Signer Signature

Date



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