



Please do not write or staple above this area. This area is reserved for bar code and processing.

Clarify case #

Wire Request

For wiring funds from an H&R Block Bank account to an account held at another financial institution.

Mail or FAX completed form to:
H&R Block Bank FAX: 816-854-8050
P.O. Box 10364
Kansas City, MO 64171-0364

Customer Information			
First Name		Middle Initial	Last Name
Address			
Street		City	State Zip
Social Security Number:		Home Phone:	Cell:
Identification			
Type (e.g., Drivers license)	Issuer (e.g., State or Agency)	Number Issue Date (mm/dd/yy)	Expiration Date (mm/dd/yy)
Type of Account		Account Number	
<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Certificate of Deposit <i>(Penalties may apply to early withdrawals from a certificate of deposit)</i>			
Account to Wire To (Beneficiary Information)			
Beneficiary Name		Amount of Wire \$	
Beneficiary Address			
Street		City	State Zip
Financial Institution Name	Institution Address		
	Street	City	State Zip
Type of Account		Routing Number (9 digits)	Account Number
<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market			
Signatures			
Account Owner Signature		Date	
FOR OFFICE USE ONLY			
Request Received			
<input type="checkbox"/> OTC <input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> FAX By:			Date:
Send thru Bank	Routing Number	Address	
Foreign Transfers		Additional Information	
Currency:	Rate:		
Approved By		Processed By	Send Date/Time Confirmation #
Date			

Instructions

- A \$15 wire fee will be charged to the account from which you are transferring unless another payment method is requested.
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