

## WIRE TRANSFER REQUEST

Member Number:	
Date:	Time of Request:
Amount of Transfer:	Fee Amount:

### Sender/Payer Information

Name:	
Physical Address:	City/State/Zip:
Country:	OFAC Score:
Account to be Debited:	Daytime Phone #:

### Recipient Financial Institution

Financial Institution Name:	
Physical Address:	City/State/Zip:
Country:	OFAC Score:
ABA/SWIFT/Transit or Sort Code:	

### Further Credit

Name:	
Physical Address:	City/State/Zip:
Country:	OFAC Score:
Account Number:	IBAN:

### Recipient/Payee Information

Name:	
Physical Address:	City/State/Zip:
Country:	OFAC Score:
Account Number:	IBAN:

### Signature

You may identify the payee or financial institution by name and by account number (or by ABA routing number). The Credit Union (and other institutions) may rely on the member or other identifying number as the proper identification, even if it identifies a different party or institution. By signing below you agree that all information contained in this Funds/Wire Transfer Request is correct. If the wire transfer is cleared through the Federal Reserve, the transaction is governed by Regulation J. You authorize the Credit Union to transfer funds as described herein and debit your account in the amount transferred, plus applicable charges.

Member/Owner (print name)	Title(if applicable)	Signature	Date
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### For Credit Union Use Only

Request Received by:
Method Received (i.e. In person, Phone, etc):
Date Received:

WireXchange Entry By:
Date Entered in WireXchange:
Time Entered in WireXchange:

### Purpose for Wire

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