

IMPORTANT INFORMATION – This document supports consumer domestic transfers, business domestic transfers, and business international transfers. This document will also support consumer international transfers that are not deemed remittance transfers.

\square One Time \square Subject to Fund Wire Transfer Agreement
ORIGINATOR INFORMATION
Name: Day Phone #:
Address:
City/State/Zip/Country:
Transfer Amount: \$
\square Foreign Exchange Wire (Recommended) \square USD Wire
Currency Type (if Foreign Exchange Wire):
BENEFICIARY INFORMATION
Account # or IBAN:
Name:
Address:
City/State/Zip/Country:
FOREIGN BANK INFORMATION
Swift/BIC:
Foreign Bank Name:
Foreign Bank Address:
Foreign City:
National Routing Code:
PURPOSE OF PAYMENT

INTERNATIONAL WIRE TRANSFER REQUEST

MEMBER#	

You may identify the payee or any financial institution by name and by account number or other appropriate identifier. The Credit Union (and other institutions) may rely on the account or other identifying number as the proper identification, even if it identifies a different party or institution. You authorize the Credit Union to transfer funds as described herein and debit your account in the amount transferred, plus applicable charges. Fund/wire transfers may be governed under Regulation E or the Uniform Commercial Code (UCC), Article 4A, dependent upon the nature of the transaction. If a wire transfer is cleared through the Federal Reserve, the transaction will also be governed by Regulation J.

ACCOUNT OWNER SIGNATURE	DATE
X	

INTERNAL USE ONLY Date and Time of Request:	
Amount of Fee: \$30.00 Identification Used: Funds Should Be Transferred From: Request Confirmed By: OFAC Verification By: Account Charged By: Funds Transfer Processed By: Second Verification, if Applicable, By: FI to FI Information or Other Special Instructions: Member Cancelling Request: Cancel Date:	INTERNAL USE ONLY
Identification Used: Funds Should Be Transferred From: Request Confirmed By: OFAC Verification By: Account Charged By: Funds Transfer Processed By: Second Verification, if Applicable, By: FI to FI Information or Other Special Instructions: Member Cancelling Request: Cancel Date:	Date and Time of Request:
Request Confirmed By:	Amount of Fee: \$30.00
Request Confirmed By:	Identification Used:
OFAC Verification By: Account Charged By: Funds Transfer Processed By: Second Verification, if Applicable, By: FI to FI Information or Other Special Instructions: Member Cancelling Request: Cancel Date:	Funds Should Be Transferred From:
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Second Verification, if Applicable, By: FI to FI Information or Other Special Instructions: Member Cancelling Request: Cancel Date:	
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Cancel Date:	FI to FI Information or Other Special Instructions:
Cancel Date:	
Cancel Date:	
Processed By:	
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