

WIRE TRANSFER FORM

Fee \$15.00

Credit Union Member Inform	ation	
Name		
Credit Union Account #		
Home Phone		
Work Phone		
Address		
Wire Information		
Amount \$		
ABA/Routing Number		
Financial Institution Receiving Wire		
City and State of Institution		
Person Receiving/Final Credit To:		
Address		
Acct. # at Financial Institution		
Additional Notes for Wire		
	Signature of Member	Date
Credit Union Use Only (sign your name and date)		
Spoke to member		
Signature Verification		
Employee calling in wire (include time)		
Person Verifying wire (include time)		
Confirmation #		
Checked on OFAC- Rec. Bank		
Checked on OFAC – Recipient/Beneficiary		