

Outgoing Domestic Wire Transfer Form

One-time and <u>new</u> recurring wires: Fill in this column <i>completely</i> .		Existing recurring wires fill in ONLY this section:	
		Recurring Wire Information	
☐ One-time	☐ New Recurring (create template)	Member Name	
Mor	whom Information	Account# w/suffix	
	nber Information	Wire amount	\$
Name		Wire fee	\$
Account# w/suffix		Purpose (required)	7
Address (no PO box)		Recipient's full name	
City, State, Zip		Codeword (required for phone	
Wire amount	\$	requests; must have previous authorization on file.)	
Wire fee	\$	Disclosure and Member Signature	
Purpose (required)		I authorize Wexford Community Credit Union to transfer funds as described here and debit my account in the amount indicated plus the applicable fees.	
Source of funds (cash, existing, etc.)			
Codeword (only for new recurring	3)		ommunity Credit Union shall not be
Financial	Institution Information		mage resulting from the following:
What institution is the wire going to?		1. Errors or delays in the transmission or delivery of the wire due to incorrect/incomplete instructions from the	
Name		member.	·
Address (no PO box)			te or error in identifying the named ough no fault to WCCU.
City, State, Zip		3. Insufficient fur	nds in the member's account.
ABA/routing number (must be 9 digits)		electronic, bey	system failure, whether human or ond the control and scope of WCCU. circumstances such as fire, flood,
Further c	redit to (if applicable):	earthquake, etc	
Financial Institution			
Routing/account#		Member Signature	
City, State, Zip			
Payee Information (final credit to):		Date	
Who will	I finally receive the funds?		
Name		Daytime Phone	
Account #			
Address (no PO box)		Revd by:	Date: Time:
City, State, Zip		Entered by:	Date: Time:
Reference info (if applicable)		Verified:	Date: Time: