

<b>One-time and <u>new</u> recurring wires: Fill in this column <i>completely</i>.</b>	
<input type="checkbox"/> <b>One-time</b>	<input type="checkbox"/> <b>New Recurring</b> (create template)
<b>Member Information</b>	
Name	
Account# w/suffix	
Address (no PO box)	
City, State, Zip	
Wire amount	\$
Wire fee	\$
Purpose (required)	
Source of funds (cash, existing, etc.)	
Codeword	
<b>Financial Institution Information</b>	
What institution is the wire going to?	
Name	
Address (no PO box)	
City, State, Zip	
ABA/routing number <small>(must be 9 digits)</small>	
<b>Further credit to (if applicable):</b>	
Financial Institution	
Routing/account#	
City, State, Zip	
<b>Payee Information (final credit to):</b>	
Who will finally receive the funds?	
Name	
Account # w/suffix	
Address (no PO box)	
City, State, Zip	
Reference info (if applicable)	

<b><u>Existing recurring wires fill in ONLY this section:</u></b>	
<b>Recurring Wire Information</b>	
Name	
Account# w/suffix	
Wire amount	\$
Wire fee	\$
Purpose (required)	
Recipient's full name	
Codeword (required for phone requests)	

<b>Disclosure and Member Signature</b>
I authorize Wexford Community Credit Union to transfer funds and described here into and debit my account in the amount indicated plus the applicable fees.
Please note: Wexford Community Credit Union shall not be liable for any loss or damage resulting from the following:
<ol style="list-style-type: none"> <li>1. Errors or delays in the transmission or delivery of the wire due to incorrect/incomplete instructions from the member.</li> <li>2. Failure to locate or error in identifying the named beneficiary through no fault to WCCU.</li> <li>3. Insufficient funds in the member's account.</li> <li>4. Wire transfer system failure, wither human or electronic, beyond the control and scope of WCCU.</li> <li>5. Extraordinary circumstances such as fire, flood, earthquake, etc.</li> </ol>
_____
Member Signature
_____
Date
_____
Daytime Phone

Rcvd by: _____ Date: _____ Time: _____
Entered by: _____ Date: _____ Time: _____
Verified: _____ Date: _____ Time: _____