



International Wire Transfer Request

Date: _____ Member Account #: _____ Type: _____
 First Name: _____ Middle Initial: _____
 Last Name: _____ Maiden Name (if applicable): _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____
 Home Phone: _____ Work Phone: _____ Cell Phone: _____
 Amount of Wire: \$ _____ (International Wire Fee: \$50)
 Reason for Transfer: _____

It is requested that funds be wire transferred from the above account to the following financial institution:

Name of Financial Institution: _____
 Address of Financial Institution: _____
 City: _____ State/Province/Region: _____
 Zip/Postal Code: _____ Country: _____
 IBAN Number: _____ International Swift Code: _____

Intermediary Bank (if applicable):

Name of Intermediary Bank: _____
 Address of Intermediary Bank: _____
 City: _____ State/Province/Region: _____
 Zip/Postal Code: _____ Country: _____

Funds to be credited to:

Beneficiary Name: _____
 Beneficiary Address: _____
 City: _____ State/Province/Region: _____
 Zip/Postal Code: _____ Country: _____
 Account Number: _____ Type: _____
 Additional Remarks: _____

The undersigned authorizes the Credit Union to initiate the transfer of funds and charge the account indicated. The Credit Union is released from all responsibility, obligation and/or costs associated with other bank's actions, fees, or failure to deliver funds. I hereby accept and understand that any fees, changes or communication levied by correspondent banks with respect to this transaction are the responsibility of either the Remitter, the Beneficiary, or both.

Authorized By (Member's Signature): _____ Date: _____

For Credit Union Use Only:					
Processed by: _____	Date: _____	Time: _____	Wired by: _____	Date: _____	Time: _____
Credit Union Verification: _____	Date: _____	Time: _____	Verification Number: _____		
OFAC Financial Institution? <input type="checkbox"/> Yes <input type="checkbox"/> No			OFAC Beneficiary? <input type="checkbox"/> Yes <input type="checkbox"/> No		

