

DOMESTIC WIRE TRANSFER REQUEST/AGREEMENT

In Person Fax Online Request

The Securityplus Federal Credit Union may but shall not be obligated to accept wire transfer instructions unless they are in writing. If this wire transfer request is received prior to 12:01 pm Eastern Time it will be processed today by 2:00 pm Eastern Time. If it is received after 12:01 pm Eastern Time, it may be processed on the next business day. While we guarantee to send the wire in the timeframe specified, we cannot guarantee when the receiving bank will receive it, nor when they will post the transactions. We recommend you allow at least (10) business days for receipt of the wire. If you are sending or receiving a wire transfer, Fedwire may be used and Regulation J and Article 4A of the Uniform Commercial code are the laws covering Fedwire transactions. (www.chips.org)

The credit union shall be reimbursed for any request issued by the member and accepted by the credit union by debiting the member's account specified in the request or, if no account is specified, any deposit account of the member with the credit union (an "authorized account"), in the amount of the accepted request plus fees which are disclosed on our Table of Fees and Charges.

Member# _____

I/we hereby authorize Securityplus Federal Credit Union to charge my/our **share/checking account #** _____ and wire \$ _____

TO: RECEIVING BANK NAME: _____
RECEIVING BANK ADDRESS: _____
RECEIVING BANK ABA #: _____
CREDIT: BENEFICIARY'S NAME: _____
ADDRESS OF BENEFICIARY _____
CITY/STATE/ZIP _____
BENEFICIARY'S ACCOUNT #: _____

In cases where the bank of final deposit does not have its own ABA# and is not on line with the Federal Reserve Bank the RECEIVING BANK acts as an intermediary for the bank of final deposit. If a beneficiary is identified by name and an identifying or account number, payments might be made on the basis of an identifying or account number even if the number identifies a person different than the named beneficiary. If you give the credit union a payment order identifying any bank in the Funds Transfer by name and by a routing/transit (R/T) or other identifying number, a receiving bank might rely on that number as the proper identification even if it identifies a bank different from the named bank. The Credit Union has no duty to detect any such inconsistency in identification, and will not be liable for any damages or losses incurred from following these instructions.

CREDIT: BANK NAME OF BANK OF FINAL DEPOSIT: _____
ACCT # OF BANK ON FINAL DEPOSIT WITH THE RECEIVING BANK: _____
FURTHER CREDIT: BENEFICIARY'S NAME: _____
BENEFICIARY'S ACCT # AT BANK OF FINAL DEPOSIT: _____
ADDITIONAL INFORMATION: _____

MEMBER'S REVIEW

Within ten (10) business days after receipt of notification (your regular periodic statement) that the request has been processed the member shall notify the credit union, in writing, of the relevant facts concerning any request not authorized by the member or properly executed by the credit union. Written notification is deemed to have been received no later than five (5) days after such notice is sent by the credit union. If the member fails to properly notify the credit union within the ten (10) business day period specified above, the credit union shall not be liable to the member for any interest payment otherwise owed to the member with respect to an unauthorized or improperly executed request. If the credit union is liable for any interest payment it shall be the dividend rate paid on the account from which the Funds Transfer should have occurred or to which the proceeds of the Funds Transfer were deposited.

** IS THIS MEMBER A POWER CHECKING ACCOUNT HOLDER? YES (FEE WAIVED) **

MEMBER SIGNATURE: _____ DATE: _____
MEMBER TELEPHONE NUMBER: _____
MEMBER'S STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____

Accepted By Employee Name: _____ Employee Phone # _____

Employee Signature: _____ Date: _____

Verified By Employee: _____ Date: _____

METHOD USED TO IDENTIFY MEMBER:(check one box and provide detail)

- Call Back details (if applicable) _____
 Driver's License: _____
 Government Photo ID: _____
 Other ID _____
 OFAC Check Done on All Parties _____