

WIRE TRANSFER REQUEST

SENDER/PAYER INFORMATION

Amount of Wire Transfer \$ _____

Name: _____

Address: _____

City, State, Zip: _____

Phone No: _____

Special Instructions: _____

Account No: _____

RECIPIENT/PAYEE INFORMATION

Name: _____

Address: _____

City, State, Zip: _____

Phone No: _____

Account No: _____

RECIPIENT/PAYEE FINANCIAL INSTITUTION INFORMATION (RECEIVER)

Name of Financial Institution: _____

Address: _____

City, State, Zip: _____

ABA Routing/ Transit No/ Account No: _____

Special Routing Instructions: _____

INTERMEDIARY FINANCIAL INSTITUTION INFORMATION (BENEFICIARY BANK)

Name of Financial Institution: _____

Address: _____

City, State, Zip: _____

ABA Routing/ Transit No/Account No: _____

Special Routing Instructions: _____

EMPLOYEE PERFORMING CALL BACK/VERIFICATION: _____ PHONE NO USED: _____

Member Signature: _____ Date: _____