

## Domestic Wire Transfer Request

DOMESTIC WIRE INSTRU	ICTIONS				
Date	e Member Name			Phone Number	
				Account #	
Member's Address					
City, State and Zip Code					
Transfer Amount Reason			for Wire		Wire Fee \$15
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RECEIVING FINANCIAL II	NSTITUTION				
Name of Financial Institution				Bank ABA/Routing Number	
Financial Institutions Ad	dress (include city,	state, and zi	o code)		
PAYEE INFORMATION					
Payee's Account Number Payee's Name					
Payee's Address (Include physical address, city, state, and zip code)				Payee's Phone Number	
FINAL CREDIT TO INFOR	MATION				
Account Number	IVIATION		Name		
Address (Include physical address, city, state, and zip cod			lde)	Phone Number	
ADDITIONAL OR SPECIA	L INSTRUCTIONS				
Details					
4A govern this transaction. name and by a routing/tran identification, even if it iden transfer funds as described Credit Union will process wi crediting of the wired funds	If I, the member, prosser ("R/T") or other intifies a bank differentherein and debit your re requests received by the receiving final	vide MUSA widentifying nut from the nater account for the by 2:30 p.m. on the nater account for the count for the	ederal Reserve utilizing the Fedith a payment order identifying mber, a receiving bank might med bank. I, the member, her the amount transferred, plus to the same day. We cannot gon.	ng any bank in the Funds T rely on that number as th reby authorize the Credit U a \$15.00 wire transfer fee guarantee same day receip	ransfer by e proper Jnion to . The ot and

Member Signature\_\_\_\_\_