

Outgoing Wire Transfer Request

Wire to (Bank/CU Name): RECEIVING Institution					
Financial Institution Name:					
Address:					
	ABA#				
ORIGINATO	(Our Member's infor PR	mation)		Originato	r ID - 221381003
Name:					
Address:					
Account#:			(Ple	ase designate ch	ecking or savings)
Was Fee Paid?			(\$20 Domestic	Wire / \$30 Inte	rnational Wire)
Amount:	\$\$		Purpose:		
BENEFICIAR	credit to (Who is rec RY <u>NO PO BC</u>	eiving the DXES ALLO			
Name:					
Address:					
Account#:			(Ple	ase designate ch	ecking or savings)
*Signature	e required				
	(5	Signature)			(date)

For Credit Union Use Accepted by: _____ Date: _____