

## Outgoing Domestic Wire Transfer Form

<b>One-time and <u>new</u> recurring wires: Fill in this column <i>completely</i>.</b>	
<input type="checkbox"/> <b>One-time</b>	<input type="checkbox"/> <b>New Recurring</b> (create template)
<b>Member Information</b>	
Name	
Account # w/suffix	
Address (no PO box)	
City, State, Zip	
Wire amount	\$
Wire fee	\$20.00
Purpose (required)	
Source of funds (cash, existing, etc.)	
<b>Financial Institution Information</b>	
What institution is the wire going to?	
Financial Institution	
Address (no PO box)	
City, State, Zip	
ABA/routing number (must be 9 digits)	
<b>Further credit to (if applicable):</b>	
Does the recipient's wiring instructions indicate a second financial institution? If so, list that below. If not, leave this section blank.	
Financial Institution	
Routing/account#	
City, State, Zip	
<b>Payee Information (final credit to):</b>	
Who will finally receive the funds?	
Name	
Account # w/suffix	
Address (no PO box)	
City, State, Zip	
Reference info (if applicable)	

<b><u>For recurring wires on file, fill in ONLY this section:</u></b>	
<b>Recurring Wire Information</b>	
Name	
Account# w/suffix	
Wire amount	\$
Wire fee	\$
Purpose (required)	
Recipient's full name	
Codeword (required for phone requests)	

<p align="center"><b><u>Disclosure and Member Signature</u></b></p> <p>I authorize Wexford Community Credit Union to initiate a wire transfer with the information provided on this form and to debit my account in the amount indicated plus the applicable fees.</p> <p>Please note: Wexford Community Credit Union shall not be liable for any loss or damage resulting from the following:</p> <ol style="list-style-type: none"> <li>Errors or delays in the transmission or delivery of the wire due to incorrect/incomplete instructions from the member.</li> <li>Failure to locate or error in identifying the named beneficiary through no fault to WCCU.</li> <li>Insufficient funds in the member's account.</li> <li>Wire transfer system failure, whether human or electronic, beyond the control and scope of WCCU.</li> <li>Extraordinary circumstances such as fire, flood, earthquake, etc.</li> </ol> <p><b>Member Signature</b></p> <p>_____</p> <p><b>Date</b></p> <p>_____</p> <p><b>Daytime Phone</b></p> <p>_____</p>
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Rcvd by: _____	Date: _____	Time: _____
Entered by: _____	Date: _____	Time: _____
Verified: _____	Date: _____	Time: _____