

Greater Woodlawn Federal Credit Union

WIRE TRANSFER FORM

This form should be used by GWFCU members to request a wire transfer of funds from GWFCU to another financial institution.

Name & Address: _____

Home Phone Number: _____ Day Time Phone: _____

Dollar Amount of Transfer Requested: \$ _____

GWFCU Account Number: _____

WIRE TRANSFER INSTRUCTIONS

Members wishing to wire funds should first contact the financial institution that will receive the funds. That institution will provide the instructions and details necessary to complete this form. Completed forms should be presented at or faxed to GWFCU. Wire requests by FAX require 2 forms of valid ID and a callback verification to member.

Financial Institution

Name: _____

(Name of Financial Institution to receive the funds)

Bank

Address: _____

(Address of Financial Institution listed above)

ABA# (Must be nine digits): _____

(ABA Routing Number which identifies the institution receiving the funds)

Further Credit Details: Asterisked items need to be completed only if funds transferred will require additional handling by receiving institution.

***Further Credit Account Name:** _____

***Further Credit Account Number:** _____

Final Credit Name: _____

Address: _____

(Name & Address of Person receiving the funds, or beneficiary)

Account Number: _____

(Account Number of person listed above)

Additional

Information: _____

(Any additional information concerning the receiving institution or beneficiary)

I hereby authorize GWFCU to perform the wire transfer indicated above. I understand that a fee of \$20.00 (domestic wire) will be automatically deducted from my account to cover this service.

GWFCU Member Signature: _____

Date: _____

FOR GWFCU USE ONLY ♦ GWFCU Acct#: _____ Suffix: _____

Date: _____ Time: _____ Wire Taken By: _____

Date of Birth: _____ : SS#: _____ Last Tran: _____