



Member Request for Outgoing Wires

Minimum Amount \$500

Member Name: _____

Member number funds to be withdrawn from: _____

Home Phone # _____ Business Phone # _____

Home Address # _____

Dollar amount to be wired \$ _____

Receiving Bank Wiring Instructions:

ABA # (9 digits) _____

Bank Name: _____

Branch: _____

City & State: _____

Special Instructions: _____

Purpose of Payment _____

Account Number at Receiving Bank: _____

Type of Account: _____

Name of Account Holder at Receiving Bank: _____

Address of Account holder at Receiving Bank: _____

City & State: _____

I understand that this information, if received by 11:00 AM may be processed the same day. Any requests after this time may be processed the next business day.

I certify the above information is correct to the best of my knowledge and by signing this form acknowledge that there is a service charge of \$20.00 for Domestic or \$35.00 for International, payable at the time of the request.

Signature: _____ Date ____ / ____ / ____

Form of Identification: _____

Charge fee to Account # _____

REQUESTS THROUGH MAIL AND FAX MUST HAVE SIGNATURE NOTARIZED
REQUESTS BY FAX ARE LIMITED TO \$5,000.00 OR LESS