

Approved/Released by

Print Name

## INTERNATIONAL WIRE TRANSFER ORDER

The member listed as originator below requests payment to be made to the beneficiary and account number named below. To the extent not prohibited by law, the undersigned agrees that this wire transfer is irrevocable and that the sole obligation of the credit union is to exercise ordinary care in processing this wire transfer and that the credit union is not responsible for any losses or delays which occur as a result of any other party's involvement in processing this transfer.

		Date:			
WireTransfer Order Submitted:		In Person	Phone	Fax	Docusign
Disclaimer: Due to differing bank nor is it possible to guarantee a tin		actices throughout the world,	it is not possible for	any U.S. institution to guarantee deliver	y of a wire transmitted outside the U.S.,
REMITTER INFORM	ATION:	<b>.</b>		PLEASE PRINT	
Member Name					
Member Date of Birth				Member Account Number	
Daytime Phone Number					
Member Complete Street Address City, State, Zip (NO P.O. BOXES) MUST have for ALL Wires					
Amount AND Purpose of Transfer		\$		Purpose:	
Member Signature Wire Password - MUST have signed Wire Agreement on file					
BENEFICIARY INFORMATION:		PLEASE PRINT CLEARLY. PLEASE COMPLETE ALL SECTIONS AS INDICATED BELOW			
Beneficiary Name		. ==.	· · · · · · · · · · · · · · · · · · ·		
Beneficiary Address					
Beneficiary Address (Country, City, Code)					
Financial Institution Name					
Beneficiary Account # at Financial Institution					
Routing Number OR					
SWIFT-BIC-IBAN					
Financial Institution Address Financial Insitution Address (City Code County)					
County)		CREDIT UNION USE - DO NOT WRITE BELOW THIS LINE			
Identity Verification In Person: verify and docume	ent aovernment issu	ued Identificatio Fax/Do	cuSian: verify 2	identifiers	
Identification: Type			ID# <sub>_</sub>	Ехр. [	Date
SEG work ID SSN					
Other:		[i.e. recent transactions, payroll info, phone #'s, address]			
Wire Password (must have	e signed Wire Agree	ement on file)			
Verification completed by:				Signature	
Account Debit Verification				O.g. a.a.o	
Wire Amount Wire Fee				Date:	
Verification Completed By: Print Name					
				Signature	
Transfer Information					
Date of Transfer:		Wire ID #			
Transfer Performed By: Print Name					
				Signature	
Approval/Release wires ove	er \$1,00 <u>0</u>			Date:	

MembersFirst Credit Union Rev. 04/2016

Signature