

TCCU Wire Form

Member Account #: _____ Amount: _____

Payee: _____ Payee Account #: _____

Payee Address: _____

City State Zip Code

Payee's Financial Institution: _____

Street Address

City State Zip Country (if not US)

Routing/Transit #: _____

Special Routing Instructions: _____

Processed By: _____ Verification: _____

You may identify the payee or any financial institution by name and by account number (or ABA routing number). The Credit Union (and other institutions) may rely on the account or other identifying number as the proper identification, even if it identifies a different party or institution. If the wire transfer is cleared through the Federal Reserve, the transaction is governed by Regulation J. You authorize the Credit Union to transfer funds as described herein and debit your account in the amount transferred, plus applicable charges.

X _____

Date/Time Received: _____

Date Wired: _____ by: _____