

Fund/Wire Transfer Request



SENDER / PAYER INFORMATION

One-Time Recurring

TUMCU Member # _____ Name: _____

Email: _____ Phone #: _____ Transfer Amount: \$ _____

RECIPIENT / PAYEE INFORMATION

Name: _____

Address: _____

City, State, Zip: _____ Country: _____

Account # or IBAN: _____

RECIPIENT / PAYEE FINANCIAL INSTITUTION INFORMATION

Name of Financial Institution: _____

Address: _____

City, State, Zip: _____

ABA Routing/Transit #: _____ AND / OR _____ Swift/Sort Code: _____

INTERMEDIARY FINANCIAL INSTITUTION INFORMATION (if applicable)

Name of Financial Institution: _____

Address: _____

City, State, Zip: _____

ABA Routing/Transit #: _____ AND / OR _____ Swift/Sort Code: _____

The Credit Union (and other institutions) may rely on the account or other identifying number provided as the proper identification, even if it identifies a different party or institution. You authorize the Credit Union to transfer funds as described herein and debit your account in the amount transferred, plus applicable charges. Fund/wire transfers may be governed under Regulation E or the Uniform Commercial Code (UCC0, Article 4A, dependent upon the nature of the transaction. If a wire transfer is cleared through the Federal Reserve, the transaction will also be governed by Regulation J.

Account Owner/Authorized Person Signature _____ Date _____

INTERNAL USE ONLY

Date & Time of Request: _____ Amount of Fee: \$ _____

Processed By: _____ Date & Time: _____