CREDIT UNION OF GEORGIA®

Fund/Wire Transfer Request

Member No:

IMPORTANT INFORMATION - This document supports consumer domestic transfers, business domestic transfers, and business international transfers. This document will also support consumer international transfers that are not deemed remittance transfers.

☐ One-Time Transfer ☐ Recurring Transfer ☐ Subject to Funds/Wire Transfer Agreement

ORIGINATOR/PAYER INFORMATION

Name: _____

Address: _____

City, State, Zip: _____ Country Code: _____

Account No: _____ Day Phone No: _____

Transfer Amount: $ _____ Purpose of Transfer (Domestic or International): _____

Special Payment Instructions: _____

BENEFICIARY/PAYEE INFORMATION

Name: _____

Address: _____

City, State, Zip: _____ Country Code: _____

Account No or IBAN: _____ Currency Type: _____

Special Identifier of Beneficiary: SSN: _____ TIN: _____ ID No: _____

BENEFICIARY/PAYEE FINANCIAL INSTITUTION INFORMATION

Name of Financial Institution: _____

Address: _____

City, State, Zip: _____ Country Code: _____

ABA Routing Transit No: _____ Swift/BIC Code: _____ Branch Information: _____

Special Routing Instructions: _____

INTERMEDIARY FINANCIAL INSTITUTION INFORMATION

Name of Financial Institution: _____

Address: _____

City, State, Zip: _____ Country Code: _____

ABA Routing Transit No: _____ Swift/BIC Code: _____ Branch Information: _____

Special Routing Instructions: _____

AUTHORIZATION

You authorize the Credit Union to transfer funds as described herein and debit your account for the amount of the fund/wire transfer plus applicable charges. You may identify the beneficiary/payee or any financial institution by name and by account number or other appropriate identifier. The Credit Union (and other financial institutions) may rely on the account or other identifying number you provide as the proper identification, even if it identifies a different party or financial institution. Fund/wire transfers may be governed under Regulation E or Article 4A of the Uniform Commercial Code depending on 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
X	

CREDIT UNION USE ONLY

Member Confirming Request: _____ ID Used: _____

Date/Time of Request: _____ Amount of Fee: $_____ Method of Transfer: _____

Transaction/Control No: _____ Processed By: _____

OFAC Verification By: _____

Special Instructions: _____

Security Method Used: _____ Date and Time: _____

Processed By: _____

Callback Details (if applicable)

Performed By: _____ Callback Phone No: _____

Source/Verification of Secure Phone No: _____

Member Cancelling Request: _____ Cancel Date: _____

Processed By: _____

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BENEFICIARY/PAYEE FINANCIAL INSTITUTION INFORMATION

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Address:
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