



Domestic and International Wire Transfer Request Form

Wire transfers are available only to existing Members of City CU. Wire requests must be received by 2pm to be processed the same day. Requests received after 2pm will be processed the next business day.
Fax completed wire request form to (972) 708-8049 or email to members@citycu.org.

Today's Date	Date Wire to be Sent	Member Name		
Street Address		City	State	Zip
Driver's License		State	Phone number	

1. Account Information

Transfer funds from the following City CU Account:

Acct #: Savings Account Checking Account Money Market Account

Requested Amount of Wire: (does not include wire fee)

Domestic Wire: **\$20.00 Fee** Int'l Wire: **\$40.00 Fee***

2. Beneficiary (Recipient) Information

**Complete Pre-Payment/Receipt Disclosure*

Beneficiary/Recipient Name	Beneficiary/Recipient Account #	Beneficiary Phone #	
* Beneficiary Address (required)	City	State	Zip

3. Beneficiary Bank Information (The bank where the beneficiary maintains their account.)

Bank Routing/Transit (ABA) Number: <i>(Domestic Wires)</i>	SWIFT #: <i>(International Wires)</i>		
Beneficiary Bank Name	Additional Information		
* Beneficiary Bank Address (required)	City	State	Zip

4. Intermediary Bank Information

Bank Routing/Transit (ABA) Number: <i>(Domestic Wires)</i>	SWIFT#: <i>(International Wires)</i>
Beneficiary Bank Name	Additional Information

My signature below indicates I have the authority to execute this funds transfer request from the account(s) listed above. City CU may rely on the information I have provided in this request to execute the wire transfer. I understand that a wire fee will be assessed for this transaction as described in City CU's Fee Schedule Disclosure.

X

Signature

X

Date

Teller Number & Initials

In person / Fax /
Email

Date

Time

Member verification method (e.g., DL #, SSN, etc.) _____