



Domestic and International Wire Transfer Request Form

Wire transfers are available only to existing Members of City CU.

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.) _____