

REQUEST FOR A DOMESTIC WIRE TRANSFER

Member Information						
Name	Street Address					
Best Contact Number	Account Number			Account Type	Date (N	IM/DD/YY)
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Wire Amount	Purpose of Wire					Wire Fee \$25.00
Beneficiary/Receiving Financial	Institution					
Financial Institution Name	ABA/Routing Number					
Street Address			I			
Intermediary Financial Institution (if applicable) ABA/Routing Number/Account Number						
Intermediary Financial Institution Street Address (if applicable)						
Beneficiary/Receiver Information Name Account Number						
Street Address						
Remarks: (additional wiring instructions)						
Wires can only be sent or received for Centex Citizens Credit Union members. Centex Citizens Credit Union relies on the information provided by the member to make the payment, even if the identifying number provided identifies a financial institution, person, or account other than the intended party. The credit union may reject any wire transfer requests that exceed the available funds in the member's account, contain incomplete information, or cannot be sufficiently authenticated. The credit union shall not be responsible for any loss or liability arising from inaccurate information provided by the member, the credit union's rejection of a wire transfer, or the rejection or delay from any other third party involved. By signing this form, the originator understands that the wire is irrevocable and will present due care						
when providing wire information. Member Signature and Date:	,					oyee Initials
member signature and bate.					Linpi	oyee miliais