

DOMESTIC WIRE TRANSFER FORM

15201 Hall Rd. Bowie, MD 20721 301.627.2666| www.princegeorgescfcu.org

Directions: This form must be completed j	for each outgoing don	omestic wire transfer.
Member Name		
Member Number/ Share		
Address		
Phone Number		
	T	
Wire Amount		
Receiving Financial Institution		
Routing Number		
FI Address		
Account Holder Name		
Account Holder Account Number		
Account Holder Address		
For Further Credit To		
Notes		
debit funds from my account and to	ransfer funds as der r failure to process	ge's Community Federal Credit Union to described herein. Failure to provide ss wire. I acknowledge there will be a fee
Member Signature		Date
Member Identification (type/number/exp. date	e)	For Credit Union Use Only
Employee Name/ Initials	Branch	Approver Name/ Initials (transaction approval limits apply)
Received and Processed by Accounting		Date/Time