South Central Credit Union Domestic Wire Transfer Request

WIRING INSTRUCTIONS Outgoing Wires

Name (sender) Account #				Account #	
AddressPhone # _			Phone #		
Amount to Wire \$ Amount of Fee \$ OFAC Run on Sender by:					
ı	Beneficiary/Final Cred	it Name:			
Beneficiary/Final Credit Account #:					
Beneficiary/Final Credit Address:					
OFAC Run on Beneficiary by:					
Institution Name:					
Institution Routing/ABA #:					
OFAC Run on Institution by:					
Further Credit					
Further Credit Routing/ABA#:					
Further Credit Address:					
OFAC Run on Further Credit by:					
Member instructions and agreement: You may identify the payee or any other financial institution by name and by account number (or ABA routing number). South Central Credit Union and other institutions may rely on the account or other identifying number as the proper identification, even if it identifies a different party or institution. If the wire transfer is cleared through the Federal Reserve, the transaction is governed by Regulation J. You authorize the Credit Union to transfer funds as described herein and debit your account in the amount transferred, plus applicable charges. By authorizing this Wire Transfer, it is agreed that this Wire Transfer is irrevocable and the obligation of this institution to exercise ordinary care in the processing procedures established for the transaction does not include any delays or losses caused by another party's involvement in the transaction.					
Check below if you will be conducting future wire transfers by phone. ☐ I agree to and accept the conditions above for all future wire transfers conducted by phone					
Member's signatureDate					
Date and	time received:	Rec	ceived by:	Identification used:	
Wire Post	ted to Members Accou	nt by:		Teller#	
Wire Subi	mitted on Alloya by: _			Teller#	

Wire Approved on Alloya by: ______ Teller#_____