

Members Credit Union International Wire Transfer Request

I, _____, owner of account number, _____, authorize a wire transfer of \$_____ to be withdrawn from my _____ account and sent using the following information:

Beneficiary Account Details

Bank Acct #: _____ Swift/BIC Code: _____

Country of Beneficiary's Bank: _____

Name of Beneficiary Bank: _____

Full Beneficiary Bank Address: _____

City: _____

Province/State & Postal Code: _____

Beneficiary Information

Name: _____

Address: _____

City: _____

Country: _____ Postal Code: _____

Purpose of Payment: _____

*****International Wires are sent in US Dollars only*****

I am aware there is a fee of \$45.00 to initiate an international wire transfer and that there may be additional fees from the receiving financial institution.

Signature: _____ Date: _____

Contact Number: (_____) _____

Wire transfer requests not initiated at a Members Credit Union branch can be faxed to 336-748-4620 or mailed to Members Credit Union, Wire Department, PO Box 5297, Winston Salem, NC 27113. Wire transfer requests received via fax or US Mail must be accompanied by a copy of a valid Driver's License or Government issued photo ID. (Do not email wire transfer requests)

FOR INTERNAL USE ONLY:

Teller Number: _____ Branch: _____ Date: _____

How was member verified: (Check One)

_____ Driver's License/Government Issued ID presented (If DL/ID presented include copy with form)

_____ Member is known to me and/or this branch location