OUTGOING WIRE INSTRUCTIONS

RECEIVING INSTITUTION INFORMATION Bank ABA# Name of Institution Address City, State, Zip **FURTHER CREDIT** (if applicable) **FINAL CREDIT (receiving account)** Name Account#(checking/savings) ___ Address City, State, Zip Special Instructions **AMOUNT:** wire (\$25 domestic/\$45 international) Fee Total MEMBER (SENDER) INFORMATION Name Account#(checking/savings) Address City, State, Zip Phone Number *Purpose of wire Authorization to wire out money from member account and deduct fee: _ Date: ____ **Member Signature**

^{*}Purpose section must be completed