

Wire Transfer Request/ Authorization Form



Wire Fee: \$25.00

Today's Date

Wire Amount

Wires received by 3:00 pm, M-F,
are processed same day.

Purpose of Wire (REQUIRED):

DMCU MEMBER INFORMATION:

Member Name (Originator/ Sender)

Member Number and Suffix

Street Address, City, State, Zip Code (Physical Address Only - PO Box Not Accepted)

Daytime Phone Number

RECEIVING FINANCIAL INSTITUTION:

Name of Receiving Bank/CU

Routing/Transit Number

Street Address of Receiving Bank/CU (Physical Address Only - PO Box Not Accepted)

City, State, Zip Code

FURTHER CREDIT - INTERMEDIARY CREDIT (BENEFICIARY'S FINANCIAL INSTITUTION - IF DIFFERENT FROM ABOVE):

Name of Institution

Account Number

Street Address of Institution (Physical Address Only - PO Box Not Accepted)

City, State, Zip Code

FINAL CREDIT - BENEFICIARY'S INFORMATION:

Name of Beneficiary

Account Number

Street Address of Beneficiary (Physical Address Only - PO Box Not Accepted)

City, State, Zip Code

Wire Instructions

By signing the wire transfer form, I authorize Diversified Members Credit Union to transfer funds as shown on this wire request form. I am responsible for the accuracy of the above information. Notwithstanding knowledge of any inconsistency, Diversified Members Credit Union and subsequent parties to the wire transfer request may act solely on the basis of the account number if the name and number disagree. The Credit Union will send the funds by any funds transfer payment system or intermediary bank at its discretion. Confirmation of receipt from the recipient is not required; if requested, the Credit Union will request confirmation but will not be responsible for receipt. I understand there is a fee associated with sending a wire and that the funds will be withdrawn from my account when the wire is sent (See Fee Schedule). There is no right to cancel or amend the transfer order. The Credit Union, at its option, may attempt cancellation or amendment if this application has been acted on, but will have no liability if the cancellation or amendment is not effectuated. If the wire transfer request is canceled, the Credit Union will not credit funds until the Credit Union confirms the recipient has not received the funds, and any funds transmitted have been returned. The Credit Union has no obligation to re-execute any rejected or returned transfer order. The Credit Union will credit any account following return or rejection. Any credit may not be equal to the original amount due to, for example, wire fees, and expenses of the Credit Union or other institutions. In addition, the Credit Union will have no obligation to pay interest on any canceled, returned, or rejected wire transfer order. The Credit Union is not responsible to any transferee, beneficiary, or other party as a result of this wire transfer order nor shall Credit Union be liable for insolvency, neglect, misconduct, mistake, or default of another institution or person, including an originator, except as provided in this request form. The Credit Union will be liable only to its immediate originator for failure to credit the amount of this wire transfer order to the recipient account solely as a result of the Credit Union's failure to exercise ordinary care or act in good faith. Subject to the foregoing, the Credit Union's responsibility for loss of interest for error or delay shall be calculated using a rate equal to the average Fed Funds rate of the Federal Reserve Bank of Chicago for the period involved. **All requests must be submitted along with a legible copy of an unexpired identification document (acceptable identification documents are State ID/Driver License, or Passport).** Diversified Members Credit Union will not execute wire transfer requests received by phone or e-mail without a call back confirmation. For security reasons, wires will not be processed remotely until after 30 business days of updating contact information on file unless a Change of Address form has been notarized and received or the contact information has been verified by DMCU.

Authorized Signature

Phone Number

Date

DMCU Use Only

Member Requested Wire:

- ☐ In Person
☐ By email via iDoc eSign
☐ Phone

Member ID Verification:

Account/Wire Code Word (if applicable):

Last 4 of SSN #:

DL #:

Call Back Verification (Remote Wire Request)

Verified by: _____
(CSR/MSR Teller ID)

Q: _____

A: _____

Q: _____

A: _____

Q: _____

A: _____

Transaction Completed By:

(CSR/MSR Teller ID)

Date: _____

Branch: _____

R/T Verified By : _____
(Input Deposit Ops Processor)

Reviewed By: _____
(Manager/Supervisor/Lead/Coordinator Teller ID)

Wire Processed in Alloya By:

Date: _____

Wire Approved in Alloya By:

Date: _____