

Wire Transfer Request

Must be completed before 12:00 p.m. EST for same day wire service in the U.S.

The Wire Transfer Fee is \$20.00.

If the wire transfer is less that \$2,500, you may fax this request to (540) 982-3937.

Date					
Wire Amount	\$				
Fee	\$				
Member Inforn	nation (Originato	r)			
Account No.	#				
Full Name					
Current Address	i				
	City		ST	Zip	
Wire To:					
Beneficiary Reci	pient Name				
Beneficiary Reci	pient's Address				
Credit Account I	Number	#			
Receiving Finan	cial Institution				
Financial Institu	tion Address				
ABA or Routing	Number	#			
Beneficiary Fina	ncial Institution				
Financial Institu	tion Address				
ABA/Routing or	Account Number	#			

You may identify the payee or any financial institution by name and by account number (or ABA routing number). The 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.

Member Signature	Date				
For Credit Union Use Only:					
Debit From Account #	_SubAccount #	_by			
Fee Posted: Amount \$	_by				
Verification: Signature Card or Picture ID	Type of ID				
Fax Request Contacted Member Date	Time	_by			
Vizo Fact Sheet Attached by	_				
Notes:					
(Transaction Codes: Member Wire Sent: GX, Wire Transfer Fee: FF)					