



WIRE TRANSFER

DATE OF REQUEST: _____

MEMBER'S NAME: _____ MEMBER'S ACCOUNT NO. _____

MEMBER'S DAYTIME PHONE NO: _____ MEMBER'S EM ADDRESS: _____

TYPE OF WIRE (check only one):

1. DOMESTIC or INTERNATIONAL sent in US Dollars

2. INTERNATIONAL sent in foreign/local currency

USD amount to wire: \$ _____

foreign/local amount to wire: _____

(ie. 100 Euro, 200 British Pounds, 1500 Mexico pesos)

country receiving funds: _____

1st BANK'S INFORMATION:

(US Corresponding Bank, required if USD sent international)

BANK NAME

BANK ABA NUMBER (if domestic bank) or SWIFT CODE / IBAN NUMBER (if foreign bank)

BANK ADDRESS (indicate Branch Name, if applicable)

CITY / STATE / ZIPCODE / COUNTRY

2nd BANK'S INFORMATION:

(Overseas Bank, if international)

BANK NAME

BANK ABA NUMBER (if domestic bank) or SWIFT CODE / IBAN NUMBER (if foreign bank)

BANK ADDRESS (indicate Branch Name, if applicable)

CITY / STATE / ZIPCODE / COUNTRY

BENEFICIARY'S INFORMATION:

BENEFICIARY'S ACCOUNT NUMBER / IBAN

NAME (ON BENEFICIARY BANK ACCOUNT)

BENEFICIARY'S FULL PHYSICAL MAILING ADDRESS (cannot be PO Box)

CITY / STATE / ZIPCODE / COUNTRY

PURPOSE OF WIRE: _____

SPECIAL INSTRUCTIONS: _____

_____ **EXCHANGE RATE: _____ AMOUNT \$: _____ FEE \$: _____ TOTAL \$: _____

MEMBER'S ADDRESS: _____

MEMBER'S SIGNATURE: _____

(required for wires of \$10,000 USD or more)

Please fax the completed form to 703-706-5001 or scan and email to wires@sdfcu.org

FOR SDFCU OFFICE USE ONLY:

Member's Identification Information: Type of ID: _____ ID #: _____ Exp: _____

SDFCU Employee: _____ Ext: _____ Time: _____ Date: _____