



Wire Transfer Request

fax to (601) 664 – 1658

Attention: TELLERS

* To ensure same day processing, all wire instructions must be received by 11:00 a.m.

* The Credit Union must be notified of any discrepancies within 30 days of the transaction date.

Transaction Amount U.S.:\$ _____ Date: _____

Written Amount (U.S. Dollars): _____

Receiving Bank Information

Receiving Bank: _____ ABA/Routing No.: _____

City/State/Zip: _____

Intermediate Bank: _____ ABA/Routing No.: _____

City/State/Zip: _____ Bank-to-Bank

Information: _____

Originator Information (telco member)

Name: _____ Member Account #: _____ Share Type: (01,75, __)

Address: _____ City/State/Zip: _____ Originator-to-

Beneficiary Information: _____

Beneficiary Information (receiver)

Name: _____ Account No: _____

Address: _____ City/State/Zip: _____

Originator Authorization

I/We hereby request Rivertrust FCU to effect this transfer at my/our risk to such persons as the beneficiary bank believes to be the within named beneficiary. Rivertrust FCU is not to be responsible for delays, errors, claims or damages occasioned by the fault or negligence of correspondents through whose hands it may pass, once Rivertrust FCU has delivered the message to its correspondent. This Funds Transfer Request will be subject to the terms and conditions of the Credit Union's Funds Transfer Authorization.

FAX Transmittal Authorization (Agreement governing any transmission using a facsimile machine or other electronic image transmission).

The Sender sends this document to the recipient, Rivertrust FCU, by transmission from one FAX machine to another. The Sender adopts as his/her original signature the signature appearing on the line identified as "Member's Signature" as reproduced by the FAX machine receiving this transmission. Each of (1) the paper fed into the sending FAX machine and (2) the printout from the receiving machine (including any complete photocopy thereof) is a counterpart of this original document.

Member's Signature: _____ **Daytime phone #:** _____

RIVERTRUST FEDERAL CREDIT UNION USE ONLY

**Teller must attach receipt debiting the member account for the wire amount and fee.*

Wire Transfer Initiated By: _____ Date: _____

Wire Transfer Verified By (if required): _____ Date: _____