

1730 Alysheba Way | Lexington, KY 40509 t: 800.234.8528 | p: 859.264.4200 | f: 859.264.4202 www.ukfcu.org

IMPORTANT INFORMATION - This document supports consumer domestic transfers, business domestic transfers, and business international transfers.

☐ One Time ☐ Subject to Fund/Wire Transfer Agreement	t name and by account numbe
SENDER/PAYER INFORMATION	identifier. The Credit Union (and
Name:	rely on the account or other ide proper identification, even if it id
Business Name:	or institution. You authorize the
Address:	
City, State, Zip:	amount transferred, plus applica transfers may be governed und
Day Phone No:	Uniform Commercial Code (UCC
Transfer Amount: \$	upon the nature of the transacti
Special Payment Instructions from Sender:	cleared through the Federal R will also be governed by Regulat
RECIPIENT/PAYEE INFORMATION	ACCOUNT OWNER/AUTHORIZED PERSON SIGNATURE
Name:	X
Address:	
City, State, Zip:	INTERNAL U
Country:	
Account No:	Confirming Funds Transfer Request:
Special Identifier of Recipient: SSN:	Name:
TIN:DL#:	Name: Date and Time of Request:
RECIPIENT/PAYEE FINANCIAL INSTITUTION INFORMATION	
	Identification Used:
Name of Financial Institution:Address:	Method of Transfer:
City State Zing	OF AC Verification by.
	Special Instructions:
ABA Routing/Transit No: IBAN/Swift Code/Sort Code:	
IBAN/Swift Code/Sort Code: Branch Information:	Security Method Used:
Special Routing Instructions:	
	For Callbacks (if applicable) or TLO:
INTERMEDIARY FINANCIAL INSTITUTION INFORMATIO	Employee Performing Callback/TI O:
Name of Financial Institution:	Phone No. Used for Callback/TLO:
Address:	_
City, State, Zip:	
ABA Routing/Transit No:	
IBAN/Swift Code/Sort Code:	Member Cancelling Request:
Branch Information:	Cancel Date:
Special Routing Instructions:	Processed By:
PURPOSE	Ops Name:
Purpose:	Ops Name:
•	Ops Name:

Fund/Wire Transfer Request

Member No:	
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tify the payee or any financial institution by y account number or other appropriate Credit Union (and other institutions) may ccount or other identifying number as the cation, even if it identifies a different party You authorize the Credit Union to transfer ribed herein and debit your account in the ferred, plus applicable charges. Fund/wire be governed under Regulation E or the mercial Code (UCC), Article 4A, dependent ure of the transaction. If a wire transfer is gh the Federal Reserve, the transaction overned by Regulation J.

INTERNAL USE ONL	-Y
Confirming Funds Transfer Request:	
Name:	
Name:	
Date and Time of Request:	
Amount of Fee: \$	
dentification Used:	
Method of Transfer:	
OFAC Verification By:	
Special Instructions:	
Security Method Used:	
Date and Time:	
For Callbacks (if applicable) or TLO:	
Employee Performing Callback/TLO:	
Phone No. Used for Callback/TLO:	
Source/Verification of Secure Telephone No:	
Member Cancelling Request:	
5	
Cancel Date:	
Processed By:	
Ops Name:	
Ops Name:	



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IMPORTANT INFORMATION - This document supports consumer domestic transfers, business domestic transfers, and business international One Time Subject to Fund/Wire Transfer Agreement **SENDER/PAYER INFORMATION** Name: Business Name: Address: City, State, Zip: Day Phone No: Transfer Amount: \$ Special Payment Instructions from Sender: RECIPIENT/PAYEE INFORMATION Name: Address: City, State, Zip: Country: Account No: Special Identifier of Recipient: SSN: TIN: DL#: RECIPIENT/PAYEE FINANCIAL INSTITUTION INFORMATION Name of Financial Institution: Address: City, State, Zip: ABA Routing/Transit No: _____ IBAN/Swift Code/Sort Code: Branch Information: Special Routing Instructions: INTERMEDIARY FINANCIAL INSTITUTION INFORMATION Name of Financial Institution: Address: City, State, Zip: ABA Routing/Transit No: IBAN/Swift Code/Sort Code: Branch Information: Special Routing Instructions:

Fund/Wire Transfer Request

Member No:		
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You may identify the payee or any financial institution by name and by account number or other appropriate identifier. 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. You authorize the Credit Union to transfer funds as described herein and debit your account in the amount transferred, plus applicable charges. Fund/wire transfers may be governed under Regulation E or the Uniform Commercial Code (UCC), Article 4A, dependent upon the nature of the transaction. If a wire transfer is cleared through the Federal Reserve, the transaction will also be governed by Regulation J.

ACCOUNT OWNER/AUTHORIZED PERSON SIGNATURE	DATE
V	
Λ	

Purpose:

PURPOSE