

T-I *fcu*

Temple-Inland Federal Credit Union

109 N. Temple Dr. ~ Diboll, TX 75941
 (936) 829-1616 ~ 1-877-829-1616 ~ Fax# (936) 829-1122
 www.templeinlandcreditunion.com

Wire Transfer Request

Please Complete, Sign & Fax back to 936-829-1122.

_____ Date

Please Withdraw (Transfer) \$ _____ from my Temple Inland FCU

Savings
 Checking Account
 Account # _____

Wire To:

Financial Institution: _____

Routing & Transit Number: _____

Account Number: _____

Account Name: _____

Street Address: _____

City, State & Zip Code: _____

Additional Instructions: _____

The fee for the transaction request indicated above is **\$20.00**. Member Initials _____

I hereby authorize Temple-Inland FCU to transfer funds by wire as shown above. I understand that the account shown will be debited for the amount of the wire *plus* any applicable fees. I agree to not hold the Credit Union liable if the funds are not received and credited due to incorrect or incomplete instructions or information.

_____ Authorized Member's Signature _____ Member's Phone Number

NOTE: Wire Transfers are irrevocable. Requests must be received before 2:00 p.m. to be posted on the same day.

For Credit Union Use Only

Verified: _____ Signature _____ DL# _____
 Request Received by: _____ Walk-In _____ Fax _____ Mail _____
 FinCEN Verification Completed: _____
 Staff Initials: _____ Date: _____ Before / After 2pm (Circle One)