



2441 N. Sierra Way • San Bernardino, CA 92405  
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 909.882.2911 Office • 909.881.4162 Fax

## WIRE TRANSFER REQUEST

PLEASE PRINT ALL INFORMATION NEATLY

Member Name	Member # (include share suffix #)	Date
Address		
City	State	Zip
Daytime Phone #	Cell Phone #	

I request that \$ \_\_\_\_\_ be wired from my above mentioned account number on \_\_\_\_\_ .  
 I understand that there will be a **\$15.00 WIRE FEE** for this transaction, which is also to be taken from the above account number. The wire instructions are as follows:

<b>WIRE TO - BANK NAME:</b>
Address:
City/State/Zip
Routing/ABA #:

<b>FURTHER CREDIT TO (If Applicable):</b>
Respondent Bank Name:
Respondent Bank Address:
Account #:

<b>BENEFICIARY - FINAL CREDIT TO:</b>
Account #:
Beneficiaries Address:
City/State/Zip:
Other Information (If Applicable):

I HAVE READ THE ABOVE INFORMATION AND AGREE THAT IT IS CORRECT. I REQUEST THAT THE WIRE TRANSACTION BE PROCESSED. I UNDERSTAND AND AUTHORIZE THE WITHDRAWAL FOR THE WIRE TRANSACTION AMOUNT AND FEE TO BE WITHDRAWN FROM MY ACCOUNT. I AGREE TO HOLD SBSEFCU HARMLESS IF THE FUNDS ARE NOT RECEIVED AND CREDITED DUE TO INCORRECT INFORMATION. **I HAVE RECEIVED A COPY OF THIS FORM.**

Member Signature: \_\_\_\_\_ Date Signed \_\_\_\_\_

### VERIFICATION METHOD

Teller Initials		Teller Number		<input type="checkbox"/> Member's Mother's Maiden Name	<input type="checkbox"/> Account Activity	<input type="checkbox"/> Signature	<input type="checkbox"/> Person Known
Government Issued I.D.	Type	I.D. #	Exp.	<input type="checkbox"/> <b>OFAC VERIFIED (Bank, Respondent Bank and Beneficiary)</b>			
<input type="checkbox"/> Call Back -Home#/Work#:		Date/Time:		Fax Verification: Sent/Time		Received/Time	

### DO NOT WRITE BELOW THIS LINE-CREDIT UNION WIRE & VERIFICATION USE ONLY WESCORP WIRE TRANSFER TO INITIATE WIRE

DATE	ON WAVE OR SPOKE WITH	BY
FEDERAL REFERENCE #:	TIME REFERENCE:	

### WIRE VERIFIED ON WESCORP

DATE	ON WAVE	BY	TIME REFERENCE
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