

# 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.t-ifcu.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 **\$30.00**. 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)