



OUTGOING WIRE TRANSFER

Date & Time of Request:	Bridge Employee Taking Request:
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REQUESTOR INFORMATION (MEMBER INFO)

Member Name:	Member Account # (to debit):
Member Address:	City/State/Zip:
Home Phone:	Work Phone:
Callback/Hard of Hearing Relay # (Must be a number on file):	
Email:	
Amount of Requested Wire: \$ + Wire Fee (\$20 Domestic /\$40 International) (Royal Fee \$15 Domestic \$35 International) = Total to be Withdrawn: \$	
Reason For Wire:	
Comments/Special Instructions:	

BENEFICIARY INFORMATION (PERSON RECEIVING THE FUNDS)

Name of Receiving Institution:	Routing/ABA:
Receiving Institution Address:	City/State/Zip:
Beneficiary Name:	Beneficiary Account:
Beneficiary Address:	City/State/Zip:
Beneficiary Phone:	Type of Account (Savings, Checking, Loan):
SWIFT (International Wires):	

FUNDS TRANSFER AUTHORIZATION AND AGREEMENT (TO BE SIGNED BY MEMBER OR VERBALLY ACCEPTED BY MEMBER)

Funds Transfer Authorization/Agreement: I hereby affirm my identity and authority to conduct this funds transfer as the Bridge Credit Union member named above and have verified the accuracy of the transfer account and routing numbers contained herein. I understand that the transfer may settle by the provided beneficiary's routing and account number even if the name provided for the beneficiary bank and/or beneficiary does not match, as stipulated by law (UCC4A-207) and I assume full liability for any delays or losses if erroneous transfer information is provided. I understand that Bridge Credit Union will make every attempt to process the wire as soon as practical, within the same business day. If Bridge Credit Union is unable to process the wire on the same business day, Bridge Credit Union will notify me. I understand that Bridge Credit Union cannot control when the beneficiary's bank receives and posts the wire to the beneficiary's account. Additional fees may be charged to the beneficiary's account by the beneficiary's bank.

Requestor's Signature: X

Printed Name:	Date:
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To be completed by Bridge Credit Union:

If authorization is provided on a separate document, fax or letter, attach to this wire transfer form. Authorization Attached: _____ (Initial)

If wire request was made by phone read the "Funds Transfer Authorization/Agreement" to member. Completed: _____ (Initial)

Federally Insured by NCUA



Bridge Credit Union, Inc.