

Domestic Wire Request & Authorization Form

This form must be presented in person at an HOTFCU branch location or faxed to your preferred branch location to be processed. If not presented in person, please be advised that we will perform a call back verification using the phone numbers on file. **We cannot use phone numbers not presently on file, or numbers changed in the last 30 days.** It is your responsibility to confirm our receipt of your faxed wire request by calling the branch which it was forwarded to. Also be advised, there is a \$25 domestic wire fee which is deducted from your account at the time your wire request is processed. **NOTE: (*) indicates required information**

*Member Name: _____ *Total Funds to be Wired: \$ _____
 *Phone No(s): _____ *Email: _____
 *Address: _____
 *Account No: _____ *From: Savings Checking Other : _____
 Purpose of Wire: _____

PLEASE PRINT VERY CLEARLY – ERRORS WILL DELAY PROCESSING

*Name of Receiving Financial Institution: _____
 *City: _____ *State: _____
 *ABA (Routing) No: _____ *Account Number to Credit: _____
 *Name of Beneficiary: _____
 *Address: _____ *City: _____ *State: _____

For Further Credit:

*Name: _____ *Account No: _____
 *Address: _____ *City: _____ *State: _____

Additional instructions from the originator: _____

By signing below, I authorize Heart O' Texas Federal Credit Union to transfer funds as described herein. I understand that my account will be debited in the amount transferred, plus applicable fee(s). In the event that the information provided is incomplete or incorrect, I release Heart O' Texas Federal Credit Union from any liability that may result, and I understand that any processing fee(s) will not be refunded.

The payee or any Financial Institution may be identified by name, account number, or ABA #. Heart O' Texas Federal Credit Union (and other institutions) may rely on the account or other identifying numbers as the proper identification, even if it identifies a different party or institution. If the wire transfer is cleared through the Federal Reserve, Regulation J governs the transaction. Please be advised, wires received before 3pm will be processed the same business day. Wires received on or after 3pm will be processed the following business day.

*Member Signature: _____ *Date: _____

For Office Use Only:

Branch: _____ In person request: ID Type: _____ No: _____

Faxed/Scanned: Time Received _____ Call Back Completed: Time _____ Caller's Initials: _____

OFAC Verified: Date _____ Time: _____ Results: Positive Negative

Authentication Details: _____

Wire Submitted by: _____ Time: _____ Date: _____