

WIRE TRANSFER REQUEST



PURPOSE OF WIRE: _____

Date _____ Amount \$ _____ (USD)

Member Name _____ Daytime Phone # _____

Member Account # _____ SAV or CKG GL WIRE LOAN

Street Address _____ City, State, & Zip _____

~~ THIS SECTION MUST BE COMPLETED BY MSR PRIOR TO SUBMITTING TO WIRE DEPT ~~

In-Person Request: A Wire Transfer Information Form must be provided to the member.

The member's identification must be verified by a Pinnacle employee.

I.D. type _____ I.D. number _____ Expiration date: _____ Accepted by: _____
(Initials/teller # of MSR)

Reoccurring Wire Request Policy: A Wire Transfer Request Agreement must be on file and a password is required for all members' phone or email wire requests. If both are not already established, the member must first come in to sign an agreement and/or establish a password.

Password Verified By: _____ *(employee initials & teller #)* Authorization Verified By: _____
(initials/teller # of MSR)

Callback Policy: Phone, email, and fax requests (and others subject to verification) must be verified by calling the member back at their home, work, or cellular phone number on the system. If the member is away from these numbers, ask for and write down the number at which they can be reached. _____ *(10-digit Phone number)* Date/Time: _____ Initials: _____

IDENTIFICATION QUESTION *(choose one):*

- Do you receive paper or eStatement? Who is the beneficiary on your account?
- What was the most recent transaction on your account? What is the source of your direct deposit?

Loan Proceeds Type of Loan _____

Receiving Institution: _____ Branch: _____
(International Wires)

Street Address _____
(Address Required for ALL Wires)

City, State, Country _____ R/T#, ABA#, Bank Code, or Swift Code _____

Intermediary Institution (If Applicable): _____

City, State, Country _____ R/T, ABA, or Account No. _____

Final Credit (Beneficiary): _____ Account or IBAN No. _____

Street Address _____
(ALL WIRES REQUIRE BENEFICIARY ADDRESS)

City, State, Country & Zip _____

Special Instructions:

I hereby request Pinnacle Credit Union to initiate the above transfer. I understand and have agreed to the terms of the Wire Transfer Request Agreement and/or Information Form (also to be used for subsequent wire transfer requests) between myself and PCU. I realize that requested wire transfers which are received by PCU later than 3:00 p.m. will be completed the following business day.

*******Fees:**

Incoming Domestic\$20.00
Incoming International..\$75.00
Outgoing Domestic\$20.00
Outgoing International.....\$75.00

**3:00PM Daily Cut-Off Time
for all Outgoing wire
requests**

Member Signature _____ Date _____ Email _____

(Wire Department Use only)

Debited by: _____
(OFAC)

Wired by: _____
(OFAC)

Approved by: _____