Wire Transfer Request and Confirmation

250 Murphy Road
Hartford, CT, 06114
Phone: 860-560-9036
www.mdecu.org

DEBTOR (ORIGINATOR) ACCOUNT INFORMATION

1

Member Name | Member No./Account Type | Primary Phone

Physical Address | City | State | ZIP

Mailing Address | City | State | ZIP

☐ Domestic — Amount in US $ | Wire Fee

☐ International ☐ In US $ — Amount in US $ ☐ In Foreign Currency — Name of Currency | Amount

CREDITOR AGENT (RECEIVING INSTITUTION)

2

AGENT ID

Financial Institution | ABA Routing No. | BIC/SWIFT

Address | City | State/Prov. | ZIP (Postal Code) | Country (Required)

INTERMEDIARY AGENT 1 (CORRESPONDENT FINANCIAL INSTITUTION)

3

AGENT ID

Financial Institution | ABA Routing No. | BIC/SWIFT

Address | City | State/Prov. | ZIP (Postal Code) | Country (Required)

Reference

CREDITOR (BENEFICIARY) INFORMATION

4

Creditor (Beneficiary) Name | Account Number

Address | City | State/Prov. | ZIP (Postal Code) | Country (Required)

Reference

SPECIAL INSTRUCTIONS

5

Ultimate Creditor

Other

NOTICE When you initiate a wire transfer, you may identify either the recipient or any financial institution by name and by account or identifying number. The Credit Union and other institutions may rely on the account or other identifying number you give, even if it does not match the party named in your instructions. Wire transfers are governed by the Member Service Agreement, Uniform Commercial Code Section 4A, and (if the transfer is cleared through the Federal Reserve) by Federal Reserve Regulation J. Transfer requests, changes, and cancellations received after 2:30 PM Eastern Time will be processed as of the following business day. If you do not have sufficient available funds in your account at the time the transfer is processed, the transfer will not be executed. If the Credit Union is obligated under applicable state law to pay you interest, the interest rate shall be equal to the dividend rate payable on the account to/from which the funds transfer was or should have been made.

6

ACKNOWLEDGEMENT I authorize Metropolitan District Employees' Credit Union to execute the transfer described above in accordance with the Member Service Agreement and debit my account in the amount requested plus applicable fees or charges (if I have not otherwise paid the Credit Union). I understand that the Credit Union may (in its sole discretion) undertake certain measures to verify the authenticity of this request, and that if the Credit Union is unable to verify the authenticity of this request, it may choose not to execute the transfer. I have read and understand the notice above regarding wire transfers.

7

Member's Signature

OFFICE USE ONLY

CU Employee Name | ID Number | Date Received | Time Received

8

CLEAR