



WIRE TRANSFER OUT REQUEST

Amount to send: _____ Type of Currency: _____

Printed amount to send: _____

Send funds: in US dollars: _____ OR in a foreign currency _____ (what currency?)

Your name: _____ GCU acct #: _____

Your address: _____ City/State/Zip: _____

1. WIRE MONIES TO:

Name of Institution: _____

Address: _____ City/State/Zip: _____

ABA (Routing Number): _____

Swift Code (Int'l only): _____ National ID: _____

2. FURTHER CREDIT TO (if applicable):

Name of Institution: _____

Address: _____ City/State/Zip: _____

Account #: _____

3. BENEFICIARY CREDIT:

Name of beneficiary: _____

Address: _____ City/State/Zip: _____

Account #: _____

IBAN # (Int'l only): _____

Any Special Instructions: _____

The Glenview Credit Union is not responsible for failed wire transfer requests due to incorrect or missing information. A wire transfer fee will be assessed. See the "Accounts and Services Fee Schedule" for the appropriate amount.

NOTE: Transfers may settle to the beneficiary bank's routing number and beneficiary's account number even if the name provided by you for the beneficiary bank or beneficiary account does not match.

Date: _____ Signature: _____ Phone: _____

Office Use Only Received by: _____ Debit members acct: _____ Fee assessed: _____

Phone Confirmation: _____ (if form not completed in person)_ NOTES: _____