

Wire Transfer Request

Date:	Taken By:	Reference No:
Sender		
Member No.:		
Name:		
Contact Phone No:		
Address (Physical Address Required. PO Box Not Accepted):		
Funds Wired To		
Bank Name:		
ABA Routing No :		
Bank Address:		
Credit To		
Account Name:		
Account No.:		
Address (Physical Address Required. PO Box Not Accepted):		
Final Credit To		
Account Name:		
Account No.:		
Address (Physical Address Required. PO Box Not Accepted):		
Amount to be Wired: \$		\$20.00 Fee
Additional Information:		
MEMBER'S SIGNATURE:		
No wires sent after 5:00 pm. Form should be received by Administrative Office no later than 4:40 pm to be processed for the current day. Carolinas Telco FCU does not process <u>any</u> international wires.		