

Member Authorization for Wire Transfer form – Internet Request

1. _____
 date to be wired initial date

2. **MEMBER INFORMATION** (complete all sections)

_____ member name joint owner name (only if joint owner requests wire) account number
 _____ member address (no p.o. box) daytime phone (where member may be reached if needed) (required)

3. **AMOUNT OF WIRE** _____ \$25.00 domestic wire fee \$50.00 international wire fee
 amount of wire

4. **DESTINATION OF FUNDS**

_____ wire to (name of bank or credit union)
 _____ address (required for international wires) city state/province zip/postal code country
 _____ receiving institution's 9-digit ABA # (for domestic wire transfer) swift/telex # or sort code (for international wire transfer)

FOR FURTHER CREDIT TO

_____ name of title or investment company or financial institution account number
 _____ address (required for all wires) (no p.o. box) city state/province zip/postal code country

FOR FINAL CREDIT TO

_____ name on account account or escrow number (IBAN# also required for european transfers – can be up to 34 characters)
 _____ address (required for all wires) (no p.o. box) city state/province zip/postal code country

_____ attention/reference/special instructions

Please print this form, sign in the space below, and fax, along with a copy of a valid government-issued photo ID enlarged to 200% to 773-462-2095. You will be contacted by Alliant Credit Union to confirm this information prior to the wire going out.

_____ signature