Outgoing Wire Transfer Request Form

Member Name and Address:	CFCU Account Number to be Charged:
	Member Telephone #:
	Identification:
Wire To: (Bank Name, ABA#, City)	
	Wire Amount: \$
	Fee: \$15.00
	Total: \$
Beneficiary (Recipient) Name, Address, Phone #	Payment Instructions: (i.e. Final Credit to; pay upon proper ID)
Credit to:	Purpose of Wire:
Beneficiary Account #:	
I authorize Cheney Federal Credit Union (CFCU) through Catalyst Corporate FCU to make this transfer, understanding that the credit union/bank assumes no liability except for its own lack of good faith or failure to exercise ordinary care and that it assumes no liability whatsoever for any loss resulting from errors in message transmission beyond its control or for errors on the part of the ultimate paying bank or office. For example, CFCU and Catalyst Corporate FCU have no liability: a. If they have followed standard and prudent verification procedures and have a reasonable basis for	
believing that the initiator of the transfer was duly authorized. b. If they cannot perform the transfer because the request was not received on a timely basis.	
c. If they must limit amount of transfer amounts to available account balance.	
d. If electronic equipment failure occurred due to no inability to effect the transfer on a timely basis.	
 e. If any loss or damage occurred after the transfer lef. f. If a request for cancellation is not received in a time authorized transfer. 	ely manner to prevent the execution of a previous duly
If the outgoing wire information is incorrect and therefore returned from the receiving financial institution, a fee may be assessed to the originator.	
Member Signature	Date

CFCU employee signature/authorization signature