

DOMESTIC OR FOREIGN WIRE REQUEST

Currency Information

Amount in U.S. Dollars:



Sender Information

Fax to: 616-249-3666

Your Name:

Your Account Number:

Savings

Checking

Street Address:

City:

State:

Zip:

E-Mail:

Phone:

Signature: _____

For Credit Union Use Only

Callback verification for all amounts over \$1,000

Receiver Information

Receiver Name:

Receiver Account Number:

IBAN

Address:

Address:

City State Zip:

Country:

E-Mail:

For Credit Union Use Only

OFAC Scan

One Time Wire

Repeating Wire*

Receiving Financial Institution Information

Bank Name:

Routing or Swift Code:

City State:

Country:

For Credit Union Use Only

OFAC Scan

Reference Information

Additional Wire Instructions:

(90 Character Limit)

* Check this box if you want us to retain the information on this Receiver for future wires. We will assign this Receiver a Template Name that you may use on the "Recurring Wire Request" form.