

AUTHORIZATION FOR WIRE TRANSFER

12620 Erickson Ave., Ste H ● Downey, CA 90242 562.803.6401 ● FAX 562.803.4461 ● www.ranchofcu.org

WIRE DATE & TIME WIRE AMOUNT		WIRE TYPE & FEE (Select One)		REQUESTED BY (Select One)		
		□ Damastis (¢35) □ Intama	المسما (۱۹۵۸)		= Fev. = Fmeil	
NAME (March er / Auth eries d Girmes)		☐ Domestic (\$35) ☐ Internal Internal	itionai (\$50)	☐ In Person DAYTIME PHONE	□ Fax □ Email	
NAME (Member / Authorized Signer)		ACCOUNT NOWIBER		DAT TIME PHONE		
ADDRESS CITY/STATE/ZIP WIRE PURPOSE (Required)						
	RECEIVING B	ANK INFORMATION				
BANK NAME	ROUTING ABA NUMBER (US DON	MESTIC) 9-Digit	SWIFT CODE (INTERNATIONAL ONLY)			
			,g		(
BANK STREET ADDRESS		CITY / STATE / ZIP			COUNTRY	
ODEOLAL INICEDIATIONS						
SPECIAL INSTRUCTIONS						
	BENEFICIA	RY INFORMATION				
BENEFICIARY'S NAME			BENEFICIARY'S AC	COUNT NUMBER		
STREET ADDRESS (Required)		CITY / STATE / ZIP			COUNTRY	
officer Application (Required)		OTT / OTATE / Zii			COSIVINI	
SPECIAL INSTRUCTIONS						
		_				
INTERMEDIARY BANK	(IF NEEDED) *					
BANK NAME		ROUTING / ABA NUMBER (US DOMESTIC)		SWIFT CODE (IN	SWIFT CODE (INTERNATIONAL ONLY)	
BANK STREET ADDRESS		CITY / STATE/ ZIP		<u> </u>	COUNTRY	
SPECIAL INSTRUCTIONS						
OF LOIDE INCITION OF THE PROPERTY OF THE PROPE						
• Fax and/or Email requests require a valid U.S. government issued identification attached to your request. Wires exceeding \$5,000 will						
not be accepted and can only be processed in person at any of our branch locations.						
 All wires will require a callback verification by our Accounting staff. Please insure a valid phone number is listed above. 						
• Requests must be received by 1:00 PM (Pacific) during normal business hours for domestic transfers, 12:00 PM (Pacific) for international.						
- nequests must be received by 2.00 in it deme, daming normal business flours for definestic transfers, 12.00 Five (Facility for international.						
• Intermediary Bank information is only needed when a wire is routed through one or more banks in order to reach it's final crediting						
institution. Many small credit unions and banks use an intermediary institution.						
, and the same and						
Member Signature X	Date:					
CREDIT UNION USE ONLY						
MEMBER SERVICES						
RECEIVED BY: (Initial / User No.)	METHOD OF VERIFICATION: (ID Type	/ Number / Exp Date)	FM ACCT VERIFICA	ATION: (Type of Ch	nange / Date Changed)	
	1		<u> </u>			
ACCOUNTING WIRED BY: (Initial / User No.) TIME / DATE WIRED CONFIRMATION NUMBER WIRE METHOD						
WIRED BY: (Initial / User No.)	CONFIRMATION NUMBER WIRE METHOD					
			□ Online □ Phone : Rep Name			
WIRE CONFIRMED BY:	TIME / DATE WIRE CONFIRMED	POSTED TO ACCOUNT BY:	POSTING VERIFIEI			
OFAC / PHONE VERIFICATION						
OFAC MATCH	FM ACCT DIFFERNCE (If Any)	TIME / DATE PHONE VERIF	ACCTNG EMPLY	P	HONE ID METHOD	
				·		
□ No Match □ Match Found						