



## Member Wire Transfer Request

Go Energy Financial  
2100 E. Exchange Place  
Suite 101  
Tucker, GA 30084  
Phone: 470-514-3000

MEMBER NAME: \_\_\_\_\_ CU MEMBER# \_\_\_\_\_

ADDRESS: \_\_\_\_\_

AMOUNT TO BE WIRED: \$ \_\_\_\_\_

ACCT TYPE FOR DEBIT OF WIRE AMT: CKING: \_\_\_\_\_ SVS: \_\_\_\_\_ OTHER: \_\_\_\_\_

NAME OF RECEIVING FINANCIAL INSTITUTION: \_\_\_\_\_

ADDRESS OF FINANCIAL INSTITUTION: \_\_\_\_\_

ABA (ROUTING & TRANSIT) # OF RECEIVING FIN INST: \_\_\_\_\_

NAME OF PERSON TO CREDIT: \_\_\_\_\_

ADDRESS OF PERSON TO CREDIT: \_\_\_\_\_

ACCOUNT NUMBER TO CREDIT: \_\_\_\_\_

**PURPOSE OF WIRE:** \_\_\_\_\_

**ADDITIONAL WIRING INSTRUCTIONS:** \_\_\_\_\_

FEDWIRE MAY BE USED. REG J IS THE LAW COVERING FEDWIRE TRANSACTIONS.

I understand that once this request has been processed, the funds will have been permanently transferred to the above beneficiary and that a stop payment order will be impossible. This payment implements an agreement between the undersigned and the beneficiary. The credit union is not a part of this agreement and has no obligations other than to wire transfer the funds in accordance with this request. I understand that the credit union handles wire transfer requests expeditiously, but the credit union cannot guarantee that this request will be completed in any specific time period.

**Please verify that all information is correct, sign and date below:**

X  \_\_\_\_\_ (Phone #) \_\_\_\_\_  
SIGNATURE DATE (Alternate Phone #) \_\_\_\_\_

### CU USE ONLY:

REQUEST TAKEN BY: \_\_\_\_\_ Branch or EMC Office \_\_\_\_\_

FAX REQ - CALL BACK TO MBR BY \_\_\_\_\_ ACCT DEBIT (WT) / WIRE FEE (FY) AMT\$ \_\_\_\_\_ BY \_\_\_\_\_

AMTS OVER \$3,000 VERIFIED WITH RECEIVING FI: \_\_\_\_\_ BY: \_\_\_\_\_

CALL/ENTRY TO CATALYST BY \_\_\_\_\_ DATE \_\_\_\_\_ VERIFIED BY: \_\_\_\_\_

BENF OFAC INQUIRY BY \_\_\_\_\_ DATE \_\_\_\_\_