



An educated choice

INTERNATIONAL OUTGOING WIRE TRANSFER FORM

Please print all information.

Date _____
Sender Name _____
Address _____
Phone _____ Cell _____
CREDIT UNION ACCOUNT # _____
AMOUNT OF WIRE \$ _____
Funds To Be Received in _____ Currency _____
Purpose of Wire _____
(Please list. Example: GBP, etc.)
(required)

RECEIVING FINANCIAL INSTITUTION

IBAN/ACCOUNT # _____
Bank Code _____ Swift Code _____
Financial Institution Name _____
Address _____
Country _____

RECEIVING PERSON

ACCOUNT # _____
Name _____
Address _____
Country _____
Anything to reference? _____

CORRESPONDENT FINANCIAL INSTITUTION

ABA # _____
ACCOUNT # _____
Financial Institution Name _____
Address _____
Country _____

IN ADDITION TO THIS FORM YOU MUST SUBMIT A DRIVER'S LICENSE OR GOVERNMENT ISSUED ID TO VERIFY YOUR IDENTITY. YOU CAN SEND A COPY TO US BY EMAIL: MSR@TVTFCU.ORG, BY FAX: 860-253-4785, OR BY MAIL.

SIGNATURE OF SENDER _____

You may identify the payee or any financial institution by name and by account number (or IBAN/ABA routing number). The Tobacco Valley Teachers Federal Credit Union (and other institutions) may rely on the account or other identifying number as the proper identification, even if it identifies a different party or institution. You authorize the Tobacco Valley Teachers Federal Credit Union to transfer funds as described herein and debit your account in the amount transferred, plus applicable charges. Funds/wire transfers may be governed under Regulation E or the Uniform Commercial Code (UCC), Article 4A, dependent upon the nature of the transaction. If a wire transfer is cleared through the Federal Reserve, the transaction will also be governed by Regulation J.

SIGNATURE OF SENDER _____

\$40.00 FEE FOR AN INTERNATIONAL WIRE

Rev. 8/25

P 860-253-4780
P 800-749-8305
F 860-253-4785

182 South Road
Enfield, CT 06082

www.tvtfcu.org

