

M1FCU Outgoing Wire Transfer Request

Use this authorization form to request a wired transfer from your M1FCU account.

Return completed form(s) (with \$21.00 fee if paying by check) in person to Modesto's First Federal Credit Union, 430 12th Street, Modesto, CA 95354. We do not accept fax or mailed in Wire Transfer Requests.

Legal Name: _____ Member # _____

Address: _____

Daytime Phone: _____ Home Cell Office

Wire Details

Amount of Wire \$ _____ Account Type: Savings Checking

Beneficiary Bank Name: _____

9-Digit ABA Number: _____

Beneficiary Name: _____

Beneficiary Address: _____

Beneficiary Account Number: _____

Additional Information/Reference: _____

Outgoing Wire Transfer Agreement & Signature

You authorize M1FCU to transfer funds (a "payment order") as shown on the outgoing wire transfer request form. Our charges for the funds transfer are disclosed in our schedule of fees. Other financial institutions involved in the funds transfer may impose additional charges. We may fail to act or delay in acting on a payment order without any liability because of legal constraint, your negligence, interruption of communication facilities, equipment failure, war, emergency conditions, or other circumstances beyond our control. We may also fail to send or delay in sending a payment order without any liability if sending the order would violate any guideline, rule or regulation or any government authority. We are not liable for consequential, special or exemplary damages or losses of any kind. You agree to indemnify M1FCU, its agents and employees against any loss, liability, or expense including attorney's fees, resulting from arising out of any claim by any person in connection with any matters subject to the agreement, except where applicable law requires. You have no right to cancel or amend this payment order. If you ask us to cancel or amend it, we may make a reasonable effort to act on your request. But we are not liable to you if for any reason this payment order is not amended or cancelled. You agree to reimburse us for any costs, losses or damages, that we incur in connection with your request to amend or cancel the payment order. If we try to cancel this funds transfer we do not have to refund your money until we determine that the beneficiary has not received the money and the money is returned to us. If we return your money, the refund may not be equal to the amount of the original placement order. Orders received to us prior to 1:00 pm will be transmitted the same business day. If you give us the transfer order after the cut-off time, we may treat the request as if we received it the next business day. You must accurately identify beneficiaries of your payment order. If you give us the name and number of a beneficiary, we and other banks may process the payment order based on the account number alone, even though the number may identify a person rather than the beneficiary named. In these cases, you are still obligated to pay us the amount of the payment order. Fedwire is the funds transfer system of the US Federal Reserve Banks. We or other banks involved may use Fedwire to make the funds transfer. If any part of the funds transfer is carried by Fedwire, your rights and obligations regarding the funds are governed by Regulation J of the US Federal Reserve Board.

When a payment order is requested by a member, the security protection involves use of identification methods that may involve photo identification, signature verification of original signature and/or call back procedure by M1FCU.

You authorize M1FCU to debit your account to pay for this funds transfer. We notify you about the funds transfer by listing it on your account statement. M1FCU will not follow any wire transfer instructions that violate from the terms of this agreement, nor will the Credit Union follow instructions that do not afford sufficient time to verify the authenticity of the instructions. **By signing below you acknowledge that the security procedures in this agreement are commercially reasonable. You are requesting funds be wired to the institution as stated on this form. You authorize the principle amount and the fee to be debited from your account. You also understand that should this request be initiated after 1:00 pm funds will be sent the next business day.**

Member Signature _____

Date _____

INTERNAL USE ONLY:

Rec'd ____ / ____ / ____ Time: _____ Proc By _____

Type of ID Used: _____ Fee Amount Debited

Manager Approval: _____



Modesto's First FCU

430 12th Street
Modesto, CA 95354
209-521-2020
Fax: 209-521-4570

