



Wire Transfer Form

All wire requests for domestic transfers MUST be received before 3:00pm EST or they will not be sent out until the following business day. This form can be scanned and emailed to gtcu@greatertogthercu.com or faxed to 716-297-6074. **If scanned or faxed, form must be notarized and correctly filled out to be processed.**

Member Information

Date of Request: _____
Sending Member's Name (Debtor): _____
GTCU Account Number (To Charge): _____
Member Address: _____
City: _____ State: _____ Zip: _____
Daytime Phone Number: () - - Fax: () - -

Member Authorization

Member's Signature _____ Date _____

Wire Transfer Instructions

Wire Amount: \$ _____
Wire Purpose (REQUIRED): _____
If purpose not stated, wire will not be processed

Intermediary FI (Instructed Agent): _____
Routing & Transit Number: _____

Receiving FI (Creditor Agent): _____
Address: _____
City: _____ State: _____ Zip: _____
Routing & Transit Number: _____

Account Name (Creditor): _____
Address: _____
City: _____ State: _____ Zip: _____
Account Number: _____
Special Instructions: _____

To Be Completed By Greater Together FCU

Request Received on ___/___/___ by: _____ In Person / Fax / Email / Mail
Verification Information: Code or Password Photo ID Number: _____
Notarized (If not an in person request): Yes / No (If No, then wire must be rejected)
Call Back Verification (If not an in person request): Yes / No (If No, then wire must be rejected)
OFAC Checked For Both Parties: Yes / No Completed by: _____
Funds Collected by: _____ on ___/___/___ Fee Collected by: _____ on ___/___/___
Wire Initiated by: _____ Date: ___/___/___ Time: _____
Wire Verified by: _____ Date: ___/___/___ Time: _____