

# Domestic Wire Transfer Authorization and Agreement



**Form Instructions:**

1 — Complete all applicable areas on the form and sign and date in the signature area.

2 — Print and mail the completed form to:

Delta Community Credit Union,  
P.O. Box 20541  
Atlanta, GA 30320-2541  
or Fax 470-351-4876

## Originator (Sender) Information

Name/Title of Account		Account Number	Type of Account
Member Number		Street Address (No P.O. Boxes)	
City	State	Zip	Country
Telephone Number		Wire Sent on Behalf of (if applicable)	

## Wire Transfer Currency Selections and Amounts

Domestic (includes U.S. states and territories)

\$ \_\_\_\_\_  
U.S. Dollar Amount

Please note that **Wires are sent Monday – Friday**, excluding federal holidays. Delta Community Credit Union's **Domestic Wire Transfer cutoff is 4:00 p.m. EST**. Wires received after this cutoff time or on Saturday will be processed the following business day.

There is a non-refundable **\$25.00 Domestic Wire Transfer Fee**.

## Beneficiary (Receiver) Information

Name		Telephone Number	
Street Address (No P.O. Boxes)			
City	State	Zip	Country
Account Number			

## Beneficiary Bank Information

Street Address			
City	State	Zip	Country
Bank Name		Bank ABA/Routing Number	



**Intermediary Bank Information (if applicable)**

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Street Address

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City

State

Zip

Country

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Bank Name

Bank ABA/Routing Number

**Signatures and Instructions:** The undersigned for and on behalf of themselves and all account holder(s) request the Credit Union to provide the transfer request above pursuant to the terms and conditions applicable to wire transfers within the Member/Savings Services Disclosures and Agreements, including, but not limited to, Section 5 – ACH and Wire Transfer Disclosure, and with the Credit Union's applicable security procedures.

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Authorized Signature and Date

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2nd Authorized Signature and Date (if applicable)

