



"A Brighter Banking Solution"

601 Fourth Street
International Falls, MN 56649

www.trustarfcu.com

Wire Transfer Request
Fax (218) 283-3145

Mortgage Pay off \$20/Transfer (Within US) \$45/Transfer (Outside of US)

Transfer Funds From: Savings Checking Other _____

Member Name _____ Acct # _____ Transfer Amount \$ _____

Address _____ OFAC

Home Phone _____ Work Phone _____

Destination FI _____ Address _____ OFAC

Routing # of Receiver _____ Acct # of Receiver _____

Receiver Name _____ Address _____ OFAC

Intermediary FI (if wire goes through another institution) _____ Routing # _____

I hereby authorize you to transfer funds as shown above. I understand that my account shown will be debited for the amount of the request and any applicable fees. I agree to hold you harmless if the funds are not received and credited due to incorrect information. I acknowledge that this transfer is being made in accordance with the terms of TruStar Federal Credit Union's Wire Transfer Agreement and that I have received a copy of it and agree to its terms.

Member Signature _____ Date _____

TruStar Federal Credit Union Use Only

MBS/Loan Staff

Date/Time Received _____/_____/_____ Staff Initials _____ Acct Open 12 mo? Yes No (need exception)

In Person Requests:

Fax/Mail/Home Banking Request

Photo ID # (required) _____

Phone Request

Phone Request for \$2,500 or less. Sender and Receiver are the same.

ID Verification: Account Password Specific Account Info. _____

Accounting

Call backs required on any Phone Request over \$2,500, Fax/Mail/Home Banking Request for any amount, or Phone Request for \$2,500 or less that the Sender and Receiver ARE NOT the same.

Signature Verified By: _____	Call Back				
	Phone # _____	Spoke to _____	No phone change in 30 days		
	ID Verification:	Account Password	Specific Account Info. _____		

Time Transferred:	Posted Member Acct:	E-mail Confirmation:	Fee Posted:	Posted By:	Verified By:
	Yes No	Yes No	Yes No		