



**MERCK EMPLOYEES
FEDERAL CREDIT UNION**

OUTGOING WIRE REQUEST FORM

Merck Employees FCU only completes outgoing wires to US Banks and Credit Unions. There is a \$15 non-refundable fee for completing a wire. Cut-off time is 3:30 pm.

WIRE INFORMATION

Wire Amount: \$ _____ Date Requested: _____

Purpose of Wire: _____ Reference: _____

ORIGINATOR INFORMATION (who is sending the wire)

Full Name: _____ Account #: _____

Full Address: _____

Phone Number: _____

RECEIVING BANK INFORMATION

Name of Bank: _____ Routing #: _____

Full Address of Bank: _____

BENEFICIARY INFORMATION (who is receiving the wire)

Full Name: _____ Account #: _____

Full Address: _____

INTERMEDIARY BANK INFORMATION (if applicable)

Name of Intermediary Bank: _____

Routing #: _____

Full Address of Intermediary Bank: _____

FOR FURTHER CREDIT TO/FINAL BENEFICIARY INFORMATION: (if applicable)

Full Name: _____ Account #: _____

Full Address of Final Beneficiary: _____

WIRE INSTRUCTIONS, NOTES OR COMMENTS:

Your signature acknowledges that you have read and agree to the Terms & Conditions contained on page three of this form. You are responsible for any and all applicable fees (\$15.00) and the withdrawal from your account.

Member's Signature: _____ Date: _____

Member's Signature:

Date:

Print Name:

Wire Amt. \$(-)

Account #:

Suffix:

Fee \$(-15.00)

GL Acct. (131.0)

F&T Code (WO)

