



**MERCK**  
Employees Federal Credit Union

**WIRE OUT TRANSFER ORDER (ONLY ORIGINALS ARE ACCEPTED)**

Date:

Wire Amount \$

**US BANK**

ABA/Routing Number (9 digits):

Bank Name:

**MEMBER'S INFORMATION**

Name:

Credit Union Account No:

Street Address:

City, State, Zip Code:

Telephone Number:

**BENEFICIARY'S INFORMATION**

Credit to Name:

Account No.:

Street Address:

City, State, Zip Code, Country:

Purpose of Wire:

Reference:

*Complete only for a final third-party beneficiary:*

Final Beneficiary Name:

Account No.:

Address:

City, State, Zip Code, Country:

Your signature acknowledges that you have read and agree to the Terms and Conditions contained on page two of this form. You are responsible for any and all applicable fees (\$15.00) and the withdrawal from your account. (Please note if mailing this form, it must be notarized.)

Member's Signature:

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Member's Signature:

Print Name:

Date:

Share Amt. \$(- )

F&T Code (WO)

Account No.:

Suffix

Fee \$(-15.00)

GL Acct. (131.0)

**WIRE TRANSFER TERMS AND CONDITIONS**

This Transfer Order governs the procedures and responsibilities concerning payment orders initiated by the account owner signing the Agreement.

**ACCOUNT OWNER LIABILITY**

By signing this Order you agree to be bound by the information you provided. You are responsible for ensuring the accuracy of your requests and the Credit Union has no duty whatsoever to verify the accuracy of requests, nor will it be liable for losses or damages arising out of requests containing erroneous information. You are required to complete and sign a separate wire request for each payment order.

**UNIFORM COMMERCIAL CODE ARTICLE 4A**

Any electronic funds transfers you request are subject to Article 4A and the provisions of this agreement.

**CUTOFF TIMES**

We are limited by our 3<sup>rd</sup> parties and bound to their times. We will make every attempt to send your wire(s) on time, however, we assume no liability for wires that cannot be completed on time by inaccurate information you supplied or other legal requirements.

**CANCELLATION OR CHANGE**

The account holder shall have no right to cancel or amend any transfer order after it has been received. However, the Credit Union shall use reasonable efforts for cancellation through its authorized agent.

**MEMBER'S LIABILITY**

In no event shall the Credit Union be liable for special, consequential, punitive or indirect loss or damage suffered by a Member in connection with this Agreement, regardless of whether the Credit Union knew or should have known such damages might be incurred. The Credit Union shall not be responsible for Member's attorney fees.

**NOTARIZED**

If this document is being mailed to the credit union for processing, your signature must be notarized.

**FOR OFFICE USE ONLY**

Transfer Order received by:                      Mail                                      In-Person

Branch Office:

ID Method:                      D.L.#                                      Merck ID Badge #

Other (describe):

Mail Order      Signature Verified                      Call Back Number:

Callback Items Verified:

Funds Verification:                      OFAC                                      Red Flag Act Review

Callback to Branch Called (name) Wire                      Date:                                      Time:

Processed by Name:                                      Verified By:                                      Verification #