



## WIRE WORKSHEET

| AGCU MEMBER ORIGINATOR INFORMATION  |                        |
|---|------------------------|
| *Name:  | *Account Number:       |
| *Physical Address:  |                        |
| Phone/Email:  |                        |
| <b>*For verification of identity, please be prepared to provide any requested security information.</b> |                        |
| BENEFICIARY BANK ROUTING INFORMATION  |                        |
| *Beneficiary Bank Name:   |                        |
| *Beneficiary Bank Address:  |                        |
| *Beneficiary Bank ABA (routing no.) or BIC (SWIFT code):  |                        |
| (Optional) Intermediary Bank Name and ABA/SWIFT:  |                        |
| BENEFICIARY INFORMATION   |                        |
| *Beneficiary Name:  |                        |
| *Beneficiary Account No. or IBAN No.:   |                        |
| *Physical Address:  |                        |
| *Amount:  | *Purpose of Wire:      |
| ( OPTIONAL INFORMATION )  |                        |
| Beneficiary Bank Sort Code:   | Attn:                  |
| Invoice:  | For Further Credit To: |
| Property Address (for closings):  |                        |

1. Please note that all wire information must be in by 3:00 Central Time to go out in the same business day.
2. Standard Wire Charge is \$20.00 per Domestic Wire and \$30 per International Wire
3. Wire requests should be sent through online or mobile banking chat feature, or in branch.

Assemblies of God Credit Union is not responsible for any losses, so long as they transmit the wire proceeds in accordance with the information provided in this form. I attest that the information provided is correct and approve this transfer.

Please Sign and Date

|  |
|--|
|  |
|--|

**\*ALL FIELDS WITH AN ASTERISK AND IN BOLD ARE REQUIRED**