WIRE TRANSFER

Florida A&M University Federal Credit Union

FOREIGN WIRE MUST HAVE IBAN, SWIFT OR BIC CODE.

1610 South Monroe Street, Tallahassee, FL 32301 Phone 850-222-4541 • Fax 850-222-5401

MEMBER'S NAME:			ACCOUNT NUMBER/SUFFIX	
Address				
CITY, STATE ZIP				
SENDER'S CONTACT PHONE NUMBER	ER:			
WORK HOME				
RECEIVER'S NAME:			ACCOUNT NUMBER	
ATTENTION:		Co	ntact Number:	
RECEIVER'S ADDRESS				
CITY, STATE ZIP				
FINANCIAL INSTITUTION NAME				
LOCATION (CITY, STATE)				
ABA OR ROUTING NUMBER		T		
AMOUNT				
	(Numeric Amount)	()	Written Amount)	
WIRE FEE			_	
FURTHER CREDIT TO:			ACCOUNT NUMBER	
Address				
CITY, STATE ZIP				
CHECKING	SAVINGS _			
LOAN MORTGAGE				
I hereby authorize the Florida A&M University Federal Credit Union to debit my account in the above-mentioned amount.				
SIGNATURE DATE				
Internal Use only Sent/Requested via: □ Mail □ Facsimile □ In Person □ Email				
Date Received (Accounting) Date Entered (Accounting) Employee Signature (Accounting) Verified by (Accounting)				