

Wire Transfer Form

For security purposes, please return this form in person or by mail. Do not send it by email.

| | | | Date | |
|--|-------------------|----------------|--|--|
| Originator Information Member Name: | | | | |
| Person Initiating Wire: | | | | |
| Address: | | | | |
| Callback Number: | | | Verified with Portico? | |
| ID Verification: | | | | |
| Funding Information | | | | |
| Member # | Shares | Гуре # | | |
| Amount \$ | Acknow | ledged fee | Shares Type | |
| Wiring Information | | | | |
| Receiving Financial Institution: | | | | |
| ABA# of Receiving Financial Instituti | on: | | | |
| Accountholder/Beneficiary: | | | | |
| | | | | |
| Address: | | | | |
| Reference: | | | | |
| | Final Credit | /Reference Inf | ormation_ | |
| Name: | | | | |
| Account Number: | | | | |
| Address: | | | | |
| | | | | |
| | m a reliable sour | | e best of my knowledge. I agree instructions cipal is authorized to process the wiring . | |
| Signature | | | | |
| Staff Signature | | | Teller # | |
| | | | | |
| Internal Use Only: Member Callback Verification Time | | Date | <u></u> | |
| Wire Completed By | | | | |