

***REQUIRED INFORMATION**

Pearl Hawaii Federal Credit Union

Domestic Wire Authorization Form

Member's Information

*Name: _____ *Date of Wire: _____
*Account No.: _____ *Account Type: _____
*Amount of Wire: \$ _____ *Mothers Maiden Name: _____
 Fee: \$30 Classic Club Fee:\$20
*Address: _____ *Birth Date: _____
_____ *Phone Number: _____

(NO P.O. BOX ADDRESSES)

Wiring Instructions

*Financial Institution: _____
Branch Location (City & State): _____
*ABA No: _____
Further Credit to: _____ *Final Credit to: _____
Address: _____ *Address: _____
(NO P.O. BOX ADDRESSES) (NO P.O. BOX ADDRESSES)
Account No.: _____ *Account No.: _____
Additional Information: _____

Purpose of Wire: _____

I authorize Pearl Hawaii Federal Credit Union (PHFCU) to withdraw funds from my account in the amount designated above plus the credit union's Member Wire Fee. I further authorize and direct PHFCU to wire these funds to the recipient named above using the wiring instructions on this Member Wire Authorization Form. I understand and agree that PHFCU cannot guarantee the date that the wire will be received by the Recipient and I agree not to hold them liable for losses due to late wire arrivals. I may identify the payee or financial institution by name and by account number (or ABA routing number). The Credit Union (and other institution) may rely on the account or other identifying number as the proper identification, even if it identifies a different party or institution. Wire transfers may be governed under Regulation E or the Uniform Commercial Code (UCC), Article 4A, dependent upon the nature of the transaction. If a wire transfer is cleared through the Federal Reserve, the transaction will also be governed by Regulation J.

Member's Signature

Date

Wires received after 10:15 AM will be sent out the next business day. Faxed wire requests are limited to \$500, must be signed by an authorized signer on the account, and can only be sent to an owner on the account. Mailed in wire request have to be notarized. **NO TELEPHONE WIRE REQUESTS WILL BE ACCEPTED!**

For Official Use Only by Wire Department

Date: _____ OFAC Check: _____ Caller's Initials: _____ Verification No.: _____
Withdraw Verification: _____ OFAC Hit: Dollar Limit: