

601 Fourth Street International Falls, MN 56649

www.trustarfcu.com

Wire Transfer Request Fax (218) 283-3145

Fax (218) 283-3145						
Loan Proceeds	Mortgage Pay off	\$25/Transfer (Withir	n US) \$45/Transfer	(Outside of US)		
	Transfer Funds F	rom: Savings	Checking Other			
Member Name	·		_ Acct #	Transfer Amou	ınt \$	
Address					OFAC	
Home Phone Work Phone						
Destination FI		Address			OFAC	
Routing # of Receiv	er	Acct # of Rec	Acct # of Receiver			
Receiver Name		Address			OFAC	
Intermediary FI (if wire goes through another institution) Routing #						
I hereby authorize you to transfer funds as shown above. I understand that my account shown will be debited for the amount of the request and any applicable fees. I agree to hold you harmless if the funds are not received and credited due to incorrect information. I acknowledge that this transfer is being made in accordance with the terms of TruStar Federal Credit Union's Wire Transfer Agreement and that I have received a copy of it and agree to its terms.						
Member Signature Date						
TruStar Federal Credit Union Use Only						
MBS/Loan Staff						
Date/Time Received/ Staff Initials Acct Open 12 mo? Yes No (need exception)						
In Person Requests: Fax/Mail/Home Banking Request						
Photo ID # (required) Phone Request						
Phone Request for \$2,500 or less. Sender and Receiver are the same.						
ID Verification:	Account Password	Specific Account I	nfo.			
Accounting Call backs required on any Phone Request over \$2,500, Fax/Mail/Home Banking/DocuSign Request for any amount, or Phone Request for \$2,500 or less that the Sender and Receiver ARE NOT the same.						
Signature Verified By	:	Call Back				
Phone #		Spoke to	No phone change in 30 days		change in 30 days	
	ID Verification:	Account Password	Specific Account Info	·		
Time Transferred:	Posted Member Acct:	E-mail Confirmation:	Fee Posted:	Posted By:	Verified By:	
	Yes No	Yes No	Yes No			