## CreditUnion

## FUNDS / WIRE TRANSFER AGREEMENT

Date:		New	Amended							
From time to time you may desire to initiate funds transfe	er from authorized a	accounts held at t	the credit union. These							
funds transfer requests are called wire orders in this Agree	ement. This Agreeme	ent governs all wi	re orders you give us.							
MEMBER IDENTI	TY INFORMATION									
Member/Owner Name:	Day Phone Numbe	er: Cell P	Cell Phone Number:							
Mailing Address:	City / State / Zip:									
ACCOUNT(S) SUBJECT TO THIS AGREEMENT										
The following authorized accounts are governed by this Agreement.										
Account Number 1:	Account Number 2	2:								
SECURITY	MEASURES									
The following security measures shall be used by the Credit Union for the purpose of verifying all wire order requests.										
The Credit Union will use the security measures provided by										
		anfirma tha wina a	udau hu calling anu of							
<b>CALL BACK PROCEDURE</b> - When we receive your wire order request, we will confirm the wire order by calling any of the contact persons authorized to verify transfers at the telephone number listed below:										
	Day Phone Number:									
Contact Person #2:	Day Phone Numbe	er:								
When verifying and authorizing a wire order you must give	e the Credit Union yo	our password, wh	ich is:							
Password:										
Phrase to Recall Password:										
	heln vou remember	vour Password)								
(in the event you forget, this is what we will provide you to help you remember your Password)										
Other Security Measures (Optional):										
AGRE	EMENT									
This Funds/Wire Transfer Agreement ("Agreement") gov		es and responsib	ilities concerning wire							
orders initiated by the Account Owner through the credit u	•	•	intres concerning wire							
<b>DEFINITIONS:</b> In this Agreement, the words, "you", "us		-	Owner that signs this							
Agreement. The words "we", "us", and "our" mean the c	-		_							
means any account or accounts designated on this Agreement. The terms used in the Agreement have the meaning										
given to them in Article 4A of the Uniform Commercial Code.										
ACCOUNT OWNER LIABILITY: You agree to be bound by any wire order, whether or not authorized, issued in your name										
accepted by us in compliance with the security procedures chosen by you in this Agreement.										
CHANGES TO AGREEMENT: The security procedures and		-								
amendment to this Agreement or by executing a new Ag	greement. This Agre	ement may not	be changed by an oral							
agreement or by a course of dealing or custom.										
SECURITY PROCEDURES: We will follow the security agr										
contact you for additional verification as needed. You a		ocedures are co	mmercially reasonable							
methods of verifying wire orders and other electronic func		two pormit that a	are cubiect to Article 1A							
<b>UNIFORM COMMERICAL CODE ARTICLE 4A</b> : Any electronic of the Uniform Commercial Code will be subject to the pro-		-	-							
credit union is located.	Svisions of this Agre									
WIRE ORDERS: This is not the document that authorizes	a wire order or ot	her electronic fu	nds transfers. We may							
require you to complete a separate document at the time of each wire order.										

NOTICE: Notice to any Account Owner is considered notice to all Account Owners.

	AUTHORIZATIONS	
		name. The credit union may rely on any actual or
_	y resembles the signature of the A	Authorized Person provided below until notified in
writing of a change.	I	I
		x
Authorized Person #1 (print)	Title (if applicable)	Signature
		x
Authorized Person #2 (print)	Title (if applicable)	Signature
	SIGNATURES	
	to all the terms and conditions of	this Agreement and acknowledge receipt of a
сору.	1	
		x
Account Owner Name (print)	Title (if applicable)	Signature
		x
Credit Union 1 Representative (print)	Title (if applicable)	Signature
	NOTARY	
Notary <b>REQUIRED</b> if form is not co	mpleted and signed in front of a C	redit Union 1 authorized employee.
State of		
County of		
Signed and sworn to (or affirmed) before me on		_ by
	Date (MM/DD/YYYY))	Name(s) of person(s) making statement
		X
		Signature of Notarial Officer
(Notary Stamp)		

FOR INTERNAL USE ONL	Y					
ID Authentication		on		by		
	Result	-	Date (MM/DD/YYYY)	-	Name of CU1 Authorized Employee	