



Scient Federal Credit Union
 P.O. Box 499 • 60 Colver Avenue
 Groton, CT 06340-0499
 Tel: 877 860 MYCU
 www.scientfcu.org

Wire Transfer Request

Wire cut off times: International is 1 P.M.; Domestic is 2 P.M.

Select Wire Transfer Type

US Dollar Amount \$ _____

Foreign Amount _____

Convert to currency: _____

OR

Currency Type _____

Originator Name _____

Member/Account Number _____

Street Address _____

City, State, Zip Code _____

Daytime Phone _____

Email Address _____

(Required on all international wires)

Beneficiary Bank _____

ABA/Routing Number _____

BIC, Swift Code, or Sort Code _____

Street Address _____

City, State, Zip Code _____

Beneficiary Full Name _____

Account Number/IBAN _____

Street Address _____

City, State, Zip Code _____

Phone Number _____

Purpose of Wire _____

(Required on all wires)

Special Instructions _____

For Intermediary Banks or further credit to final beneficiary

You may identify the payee or any financial institution by name and by account number or other appropriate identifier. Scient Federal Credit Union (SFCU) may rely on the account or other identifying number as the proper identification, even if it identifies a different party or institution. You authorize SFCU to transfer funds as described herein and debit your account in the amount transferred, plus applicable charges. 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.

Print Name _____ **Signature** _____ **Date** _____

For Official Use Only

Member Identification Type:	Issued By:	ID Number:
Exp. Date:	Copy of ID attached:	Receiving Employee:

Wire Approval: _____ **Date:** _____

OFAC Verification:	Wire Entered By:	Wire Verified By:
Account Debited:	Reference #:	