



P.O. Box 128  
Sylacauga, AL 35150  
256/245.4776  
www.myhscu.com

## Member Wire Transfer Authorization

Date: \_\_\_\_\_

Member Information:

Name: \_\_\_\_\_

Daytime phone number: \_\_\_\_\_

Driver's License: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I hereby authorize Heritage South Credit Union to wire \$ \_\_\_\_\_ from my account number \_\_\_\_\_ with the following wiring instructions:

International Wire

Name of Receiving Bank: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ABA (or Swift Code for International) # of Receiving Bank: \_\_\_\_\_

Additional Instructions: \_\_\_\_\_

Receiver's Information:

Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

*There is a wire transfer fee of \$8.00(\$30.00 if international) which will be automatically deducted from your account. All wire forms that are received after 1:00 p.m. will be posted the following business day.*

The undersigned agrees the liability of Heritage South Credit Union shall be limited to transfer errors within the credit union's control. Heritage South Credit Union is not liable for any loss or damage arising out of circumstances or events not within the credit union's control, and in any event credit union is not liable for any consequential or special loss or damage. The undersigned has read the sections of the Membership and Account Agreement and Rate and Fee Schedule regarding wire transfers.

If not signed at the credit union, form **must** be notarized.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please print legibly in ink or type. When completed, deliver or fax to: Heritage South Credit Union 60 Gene Stewart Blvd. or 901 N. Broadway · Sylacauga, AL · Fax 256-401-1288