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 $12.00($40.00 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 256-401-1288

P.O. Box 128
Sylacauga, AL 35150

Call Center: 256-245-4776
Main Fax: 256-249-0116

http://myhscu.com