

Rutgers University Student & Alumni Federal Credit Union

**WIRE REQUEST FORM TO WIRE FUNDS
Out of the Credit Union into another Account**

From

Your RUSAFCU Account # _____ Savings Checking

Amount \$ _____ Fee \$ _____
\$15.00 Domestic / \$35 International

Name _____

Address _____

Phone _____

To

Bank Name _____

Address _____

ABA # _____

Further Credit _____

Routing # _____

Final Credit Name _____

Account # _____ Savings Checking

Additional Notes _____

Authorized Signature of Member _____ **Date**

CU Employee Signature _____ **Date**
Must attach a copy of a valid drivers license or ID

<p>FOR OFFICE USE ONLY:</p> <p>Given To: _____</p> <p>Date _____ Person _____</p> <p>Time: _____ Authorization # _____</p>
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Please fax completed form to:
Rutgers University Student & Alumni Federal Credit Union
Fax: (732) 932-7968