JM ASSOCIATES Federal Credit Union

Outgoing Wire Transfer Form

Member Name _____ Date _____

Address _____

Phone Number_____

Member # & Suffix _____ Time _____

Wire To:

Beneficiary Name _____ Beneficiary Acct# _____

Beneficiary Address_____

_____

Financial Institution_____

Address _____

City _____State_____

International wire swift code: _____

Financial Institution
ABA/Routing #_____

Amount $_____

Reference _____

Credit Union Use Only

Wire info taken by:_____

Posted to acct by: _____
(GL# 730100)

Fee posted by: _____
(GL# 130132) Domestic wires $15.00
(GL# 130132) International $40.00

Code Word Verified _____

OFAC/SDN Verified_____

Call Back Verification _____

All payment orders, amendments and cancellations orders will be made according to JM Associates Federal Credit Union's security procedure. The security procedure is intended to verify that an order is authorized and detect errors in the transmission or content of the payment order. The security procedures we will use are: 1) completion of the wire transfer form **and one of the following** 2) positive photo I.D. for requests in person. 3) notarized signature for requests through the mail, or 4) **password verification** if facsimile request. **By signing below, you agree to the above security procedure, the agreement on page 2 and you attest that the information you provided on page 1 is correct.**

Member Signature_____ Date_____

Agreement: By requesting this funds transfer, the undersigned member ("you") and JM Associates Federal Credit Union ("we", "us" or "our") agree as follows:

Regulation J determines the right and liabilities for Fedwire wire transfers and Florida's Uniform Commercial Code determines rights and liabilities for non-Fedwire wire transfer. You agree to examine the periodic statement within 14 days after the statement is mailed and immediately notify us of any discrepancy or error. If you fail to notify us within 14 days after the statement is mailed, you shall discharge and relieve us from any liability of claims, demands or expenses (including attorney's fees) in connection with such discrepancy or error. If a beneficiary is identified by name and/ or only by an identifying or account number, payments to the beneficiary may be made using that identifying or account number even if the number identifies a person different than the named beneficiary. If a payment order identifies an intermediary party or beneficiary's financial institution by both name and/or only any identifying or account number, we and any receiving financial institution may rely on the number as the proper identification of the intermediary party or beneficiary's financial institution. You agree to indemnify the Credit Union for any loss or expense that result from its reliance on an incorrect identifying or account number.

Any rate of interest that the Credit Union may be obliged to pay as a penalty under Regulation J or Florida law shall be equal to the dividend rate paid on the account from which the funds transfer should have occurred or to which the proceeds of the fund transfer were or should have been deposited, whichever is lower. The Credit Union's liability is limited to the payment of this interest. You agree that under no circumstances will the Credit Union be liable for any indirect, incidental, consequential, remote or special losses or dames including attorney's fees and costs.

The cut-off time is 4:00pm (EST) each weekday we are open which is not a holiday. Orders received after the cut-off times are treated as being received the next day we are open. The cut-time may be extended without notice to you if an intermediary or beneficiary institution is closed.

We are under no obligation to accept a payment order, cancellation or amendment but may do so at our option. We are not obligated to give you notice of such action but notice may be given in you next periodic statement or as otherwise required by law. Funds transfers will be made in accordance with our rules, procedures, and fees as amended from time to time. We may cancel or modify this agreement at any time without prior notice to you. You may not modify this agreement without prior written approval from us. No representation or statement made by any associate of ours shall be binding on us.

All payment orders, amendments and cancellation order will be made according to the Credit Union's procedure. The security procedure is intended to verify that an order is authorized and detect errors in the transmission or content of the payment order. The security procedures we will use are: 1) completion of the wire transfer form **and one of the following** 2) positive photo I.D. for requests in person. 3) notarized signature for requests through the mail, or 4) **password verification** if facsimile request. A payment order, amendment of cancellation order verified by the security procedure is effective as your order, whether or not the order is in fact authorized by you. You agree to the above security procedure.

Initials _____