

Tri-Valley Service Federal Credit Union
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This Funds Transfer Security Agreement is an addendum to the rules and regulations as set forth in Tri-Valley Service Federal Credit Union's Funds Transfer Agreement and Notice.

The purpose of this Funds Transfer Security Agreement is to provide maximum security to our members when wiring funds out of an account at Tri-Valley Service. The wiring of funds will be transferred through VIZO Financial.

One security step is to establish a predetermined phone number that will be called by an employee from Tri-Valley Service. We will then verify the wire information that we received earlier. The other security step is to also include a code-word to confirm the wire transfer request. One of the above security procedures will be required on all wire transfers leaving Tri-Valley Service.

Please fill in your information, print out completed form and sign before returning to the credit union. The fee for domestic wire transfers \$35.00. Wiring instructions must be received by 3PM to be processed the same day.

Important: Please contact the Receiving financial institution for wire transfer instructions. Routing Numbers on the bottom of the checks are often not accurate for the purpose of wire Transfers.
Domestic

Today's Date _____ Date: Transaction _____

Please fill out the following information to authorize Tri-Valley Service to perform the wire transfers on your behalf.

Name: _____
Tri-Valley Service Member Number: _____
Receiving Institution Name: _____
Receiving R/T Number: _____
Receiving Account Number: _____

***Pre-authorized call-back telephone number is the telephone number on file. (Please keep Tri-Valley Service aware of any and all changes.)

***Pre-authorized password must be 5-10 characters long and can be alpha, numeric, or any combination: _____.
(Please retain a copy of this password for your records.)

I hereby authorize Tri-Valley Service Federal Credit Union to perform wire transfers to the previously stated receiving institution with the use of my pre-authorized call-back number or my pre-authorized password.

Signature: _____ Date: _____

By signing this form, I hereby authorize TVSFCU to transfer funds by wire as per the above listed instructions. I understand that the account shown herein will be debited for the amount of the wire, plus any applicable fees. I agree that the Credit Union (and other institutions) may rely on the member or other identifying number as the proper identification, even if it identifies a different party or institution. I understand that if the wire transfer is cleared through the Federal Reserve, the transaction is governed by Regulation J. I agree to hold the Credit Union harmless if the funds are not received and credited due to incorrect or incomplete instructions or information. A fee will be deducted from my account in the event this wire is lost through no fault of TVSFCU.

TVS Authorized Signature _____ Date: _____

