



27000 Evergreen Rd.
Lathrup Village, MI 48076
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MichiganFirst.com

Wire Transfer Request Form

Wire cutoff is 4:00 p.m. daily. Wire requests received after this time will be processed the following business day.

Member Information

Michigan First Account Number:		Account Suffix:	
Business/Member Name:		Phone Number:	
Business/Member Address:			
City:		State:	
		Zip Code:	
Amount:		Please withdraw the wire transfer fee from: ☐ My Account ☐ MoneyPerks Points ☐ Loan Proceeds	

Receiving Financial Institution

Bank's Name:			
Routing Number (must be 9 digits):		Bank's Phone Number:	
Bank's Address:			
City:		State:	
		Zip:	
Crediting Bank (if different):		Crediting bank's account:	
Purpose for Wire:			
Additional Information:			

Recipient

Recipient Name:			
Account Number:		Phone Number:	
Address:			
City:			
State:		Zip Code:	

The Credit Union has no obligation to verify your identity. If such verification cannot be obtained, the Credit Union is not obligated to transfer the funds. By signing this request you acknowledge that the Credit Union does not have an obligation to ensure that the information you provided is correct. If the funds are transferred incorrectly at your request, they cannot be returned and Michigan First Credit Union is not liable for such errors.

Member Signature _____ Date:

For Credit Union Use Only

Required signature requesting member verification.

Team Member: Print Name: Signature:

Forms of Identification (Minimum 2) Verified: Wire Date: