

**WIRE TRANSFER FORM**  
**VANDERBILT UNIVERSITY CREDIT UNION**  
**PO BOX 128426 \* NASHVILLE TN 37212**  
**PHONE: (615) 936-0300      FAX: (615) 936-0464**

**SENDER/PAYER INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Transfer Amount: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

**RECIPIENT/PAYEE INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Account Number: \_\_\_\_\_

Drivers License: \_\_\_\_\_

**RECIPIENT/PAYEE FINANCIAL INSTITUTION INFORMATION**

Financial Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

ABA Routing #: \_\_\_\_\_

Branch Information: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

MEMBER ACCOUNT#: \_\_\_\_\_

MEMBER SIGNATURE: \_\_\_\_\_

DATE \_\_\_\_\_