

## Wire Instruction Sheet

### Incoming Wires

Incoming wires (deposits to a Kinecta account) must be initiated at the Financial Institution sending the wire. A fee is assessed for an incoming wire; please refer to the current Schedule of Fees and Charges.

The following information may be required:

- Kinecta's routing number is 322278073.
- Account number/member number can be found on your statement of account.
- Member name as it appears on the desired share account
- Kinecta Federal Credit Union, Member Contact Center CU/11, 1440 Rosecrans Avenue, Manhattan Beach, CA 90266.

### Outgoing Wires

Outgoing wires (from a Kinecta account) can be processed in person in a Kinecta Member Service Center or via fax/mail through our Member Contact Center (MCC).<sup>\*</sup> A fee will be assessed for an outgoing wire; see Kinecta's current Schedule of Fees and Charges. Wire Transfer disputes must be received within 90 days for domestic wires and 180 days for international wires of the wire transfer date.

### \*Fax / Mail Request

- The Authorization for Wire Transfer form must be completed and signed by an authorized signer on the affected Kinecta membership/share.
- Fax to 310-727-8235 or mail to: Kinecta Federal Credit Union, Member Contact Center CU/11, 1440 Rosecrans Avenue, Manhattan Beach, CA 90266.
- Include a clear copy of your valid US government issued identification.
- Wires processed via fax or mail through the MCC can only be processed if the funds are being deposited into an account in the name of the original member<sup>\*\*</sup>. Wires to someone other than the membership/share owner (third party) cannot be processed in the MCC. These wires can be completed in person in a Kinecta branch.

<sup>\*\*</sup> Third Party Outgoing Wire Exception: Wires to a title or escrow company can be processed in the MCC if the escrow or title instructions show that the final credit is to the member.

### In-Person Request

- Authorization for Wire Transfer may be completed prior to visiting a Service Center, but do not sign request form until requested by Credit Union employee.
- Authorized signer must bring government issued identification; such as unexpired Driver's License, State ID Card or U.S. Passport.



**KINECTA**  
FEDERAL CREDIT UNION

1440 Rosecrans Ave.  
Manhattan Beach, CA 90266  
800.854.9846 • www.kinecta.org

RETAILSERVICES

## AUTHORIZATION FOR WIRE TRANSFER

**FAX and MAIL requests:** All Fax and Mail requests **must** be processed through the Member Contact Center (MCC). Send a fully completed Authorization For Wire Transfer **form** along with a clear copy of your valid **U.S. government issued identification** to fax number 310-727-8235 or mail to Kinecta Federal Credit Union, Member Contact Center CU/11, 1440 Rosecrans Ave. Manhattan Beach, CA 90266. A representative will contact you to perform an identification process prior to completing this wire request. **IMPORTANT NOTE:** Wires to a third party can only be processed in person and not by Fax/Mail. For assistance, call 800.854.9846 or 310.643.5400.

**IN PERSON requests:** In Person Wire Transfer requests may be processed at any local Kinecta Member Service Center.

**Wire CUT OFF times:** Fax and Mail requests must be received no later than **11:30 AM PST** and In Person requests must be received no later than **12:30 PM PST** for Domestic Wires and **11:30 AM PST** for International Wires.

SECTION 1	WIRE DATE	WIRE AMOUNT	WIRE TYPE (CHECK ONE) <input type="checkbox"/> Domestic <input type="checkbox"/> International	REQUEST PROCESSED THROUGH <input type="checkbox"/> Branch <input type="checkbox"/> Fax / Mail	
	INTERNATIONAL WIRE DISCLOSURE PROVIDED <input type="checkbox"/> Person <input type="checkbox"/> Fax _____ <input type="checkbox"/> Email _____				
	NAME (MEMBER / JOINT / AUTHORIZED SIGNER)	CREDIT UNION ACCOUNT NUMBER	SHARE NUMBER TO DEBIT		
SECTION 2	ADDRESS	CITY / STATE / ZIP	DAYTIME PHONE		
	<b>DESTINATION BANK INFORMATION</b>		BANK NAME		
	ROUTING (ABA) NUMBER (DOMESTIC)	SWIFTCODE (INTERNATIONAL)			
	BANK STREET ADDRESS	CITY / STATE / ZIP	COUNTRY		
SPECIAL INSTRUCTIONS					
SECTION 3	<b>BENEFICIARY'S (RECIPIENT'S) INFORMATION</b>				
	BENEFICIARY'S NAME (AS IT APPEARS ON THE ACCOUNT)		BENEFICIARY'S ACCOUNT NUMBER		
	STREET ADDRESS	CITY / STATE / ZIP	COUNTRY		
SPECIAL INSTRUCTIONS					
SECTION 4	<b>INTERMEDIARY BANK INFORMATION</b>		BANK NAME		
	ROUTING (ABA) NUMBER (DOMESTIC)	SWIFTCODE (INTERNATIONAL)			
	BANK STREET ADDRESS	CITY / STATE / ZIP	COUNTRY		
AUTHORIZATION	<b>GENERAL WIRE INFORMATION</b> I authorize Kinecta Federal Credit Union to transfer funds as shown on this wire request form. I am responsible for the accuracy of the above information. Notwithstanding knowledge of any inconsistency, the Credit Union and subsequent parties to the wire transfer order may act solely on the basis of the account number if the name and number disagree. The Credit Union will send the funds by any funds transfer payment system or intermediary bank at its discretion. Confirmation of receipt from the recipient is not required; if requested, the Credit Union will request confirmation but will not be responsible for receipt. A confirmation request fee may be assessed. I understand that there is a fee associated with sending a wire and that the funds will be withdrawn from my account when the wire is sent. (See Schedule of Fees.) In addition, the Credit Union will have no obligation to pay interest on any cancelled, returned, or rejected wire transfer order. The Credit Union is not responsible to any transferee, beneficiary, or other party as a result of this wire transfer order nor shall the Credit Union be liable for insolvency, neglect, misconduct, mistake, or default of another institution or person, including an originator, except as provided in this request form. The Credit Union will be liable only to its immediate originator only for failure to credit the amount of this wire transfer order to the recipient account solely as a result of the Credit Union's failure to exercise ordinary care or act in good faith. The Credit Union's liability for such failure will be limited to the amount of the transfer order plus lost interest or as otherwise required by law. Subject to the foregoing, the Credit Union's responsibility for loss of interest for error or delay shall be calculated using a rate equal to the average Fed Funds rate of the Federal Reserve Bank of San Francisco for the period involved.				
	<b>DOMESTIC WIRE ONLY</b> There is no right to cancel or amend the transfer order. The Credit Union, at its option, may attempt cancellation or amendment if this application has been acted on, but will have no liability if the cancellation or amendment is not effectuated. If the wire transfer request is cancelled, the Credit Union will not credit funds until the Credit Union confirms the recipient has not received the funds, and any funds transmitted have been returned. The Credit Union has no obligation to re-execute any rejected or returned transfer order. The Credit Union will credit any account following return or rejection. Any credit may not be equal to original amount due to wire fees, and expenses of the Credit Union or other institutions.				
	<b>INTERNATIONAL WIRE ONLY</b> If the transfer order request is for payment in a foreign country the Credit Union may execute the wire transfer order in such foreign country's currency at the Credit Union's buying rate of exchange for U.S. dollars when the transfer is affected. For international funds transfers, you have the right to cancel your funds transfer via written or verbal request within 30 minutes of paying for the transfer if: (1) Your request to cancel enables the credit union to identify your name and address or telephone number and the particular transfer to be canceled; and (2) The transferred funds have not been picked up by the designated recipient or deposited into an account of the designated recipient. The credit union shall refund, at no additional cost to you, the total amount of funds provided by you in connection with the funds transfer, including any fees and, to the extent not prohibited by law, taxes imposed in connection with the transfer, within three business days of receiving your request to cancel the transfer order.				
	SIGNATURE (MEMBER / JOINT OWNER / AUTHORIZED SIGNER)			TODAY'S DATE	
	DEPARTMENT	DEPARTMENT CONTACT #	MEMBER IDENTIFICATION	DATE / TIME ACCEPTED	
	ACCEPTED BY (PRINT NAME)	ACCEPTED BY (SIGNATURE)	APPROVED BY (PRINT NAME)	APPROVED BY (SIGNATURE)	
	ACH	WIRE DEPT PROCESSOR (SIG / INITIALS)	WIRE DEPT APPROVER (SIG / INITIALS)	AMOUNT VERIFIED	OFAC VERIFIED