



PO Box 24901, El Paso, TX 79914-9001 | 1-800-351-1670 | email: cumail@firstlightfcu.org | website: www.firstlightfcu.org

Wire Transfer Request

I _____, am requesting a wire transfer. Please refer to information below.

My FirstLight Account: _____

Number/SSN: _____

Amount Being Sent: _____

Recipient's Name: _____

Recipient's Account number: _____

Recipient's Routing Number: _____

Recipient's Institution Name: _____

Recipient's Address (No P.O. Box):

City: _____

ST: _____

ZIP: _____

My Contact Phone Number: _____

Signature: _____ Date: _____

Please attach copy of valid identification.