NORTHROP GRUMMAN
FEDERAL CREDIT UNION

WIRE TRANSFER FORM

To be processed on the same business day, this form and a legible copy of your driver's license are required by 12:00 p.m. Pacific. Please obtain instructions for the secure transmittal of your documents by calling the Credit Union at 800-633-2848. For security reasons, you may be contacted prior to completion of this transaction.

ORIGINATOR/SENDER'S INFORMATION

NAME:	ACCOUNT #	MEMBER #

STREET:

CITY:	STATE:	ZIP:

TELEPHONE

PRIMARY: SECONDARY: OTHER:

WIRE AMOUNT

BENEFICIARY/RECEIVER'S INFORMATION: (Wire Transfer Instruction)

RECEIVING FINANCIAL INSTITUTION OR U.S. CORRESPONDENT BANK:	(OFFICE USE ONLY) TELEGRAPHIC NAME:

BANK/BRANCH LOCATION:	9 DIGIT ABA/ROUTING #:

BENEFICIARY OR CORRESPONDENT BANK (Optional field)	ACCOUNT # (Required if beneficiary"s or correspondent bank is used)

BENEFICIARY NAME (Req'd field) _____

Street Address (Req'd field) (no PO Box): _____

City: _____ State: _____ Zip: _____

ACCOUNT # (Required field)

FOR FURTHER CREDIT TO:

ULTIMATE RECEIVER'S NAME (Optional field) _____

(Req'd if ultimate receiver is listed)

Street Address (no PO Box): _____

City: _____ State: _____ Zip: _____

ACCOUNT # (Required if ultimate receiver is listed)

FOR ESCROW TRANSACTION:

REFERENCE ESCROW # (Optional field)	MISCELLANEOUS INFORMATION (Optional field)

I authorize Northrop Grumman Federal Credit Union to transfer funds as shown on this wire request form. I understand and agree that 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. I understand that there is a fee associated with sending a wire and that the funds will be withdrawn from my account when the wire is sent.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) 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 fulfilled. 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, for example, wire fees, and expenses of the Credit Union or other institutions. 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.

Your signature is an acknowledgement that you read, understood and agree to be bound by the above disclosure and agreement.

MEMBER SIGNATURE	DATE

OFFICE USE ONLY

PROCESSED BY	ID VERIFIED BY	TYPE OF ID

DATE	WIRE$	CU FEE

ELECTRONIC SERVICE DEPT ENTERED BY	ELECTRONIC SERVICES VERIFIED BY	MGR APPROVAL	MGR APPROVAL