

Wire Transfer Department Temporary Wire Limit Increase Policy Exception Form

IMPORTANT: Exceptions to send an Outgoing Wire Transfer over the current approved wire limit must be signed by an Authorized Signer. The wire increase limit is temporary and valid only for the dates specified in this document.

Credit Union/Company/Department Name			Date				
Requestor's Name			Requestor's Title				
Requestor's Phone			Requestor's En	Requestor's Email			
Wire Limit Increase Effective Date			Wire Limit Increase End Date				
TEMPORARY LIMIT INCREASE (COMPLETE ALL SECTIONS BELOW)							
User's Name	Non-Repetitive Dollar Limit	Repetitive Dollar Limit	Daily Dollar Limit	Initiator	Approver	Email Address	
AUTHORIZED SIGNATURE							
Authorized Signer's Name*	thorized Signer's Name* Authorized Signer's Title		Signature			Date	
* Signed form must be emailed by an Authorized Signer as designated in the Policy Designation of Signing Authority for Wire Transfers.							
EMAIL COMPLETED FORM TO: WireServices@ncb.coop							
INTERNAL DEPAR	RTMENT BANK	USE ONLY	Treasury Department I	Manager's Ap	proval Required	d for Internal Users Wire Limit Changes	
 Treasury Department Approval A	uthorized Name	Treasury Departs	ment Approval Author	ized Signatur	e	Date Approved	
WIRE TRANSFER DEPARTMENT:							
Current Limit Initiator	Current	Limit Approver					
Comments:							