

Nelnet Bank
13907 S. Minuteman Dr.
Ste. 250
Draper, UT 84020

 | **On Your Way**
Monday through Friday 8:30 am - 5:00 pm MST
Deposits@NelnetBank.com | 800.446.4190 | nelnetbank.com

Outgoing Wire Transfer Request Form

All outgoing wire transfers are subject to a \$15.00 fee. This request form must be received by 3:00 pm Eastern Time on a business day to be processed on the same day.

1. Originator Information

Account Holder Name _____

Nelnet Bank Account Number _____ Wire Transfer Amount (U.S. Dollars) _____

Phone Number _____ Date Wire to Be Sent (DD/MM/YY) _____

2. Beneficiary and Receiving Bank Information

Name on Receiving Account _____ Receiving Account Number _____

Bank Name _____ Bank 9 Digit Routing Number of ABA _____

Bank Address _____ Bank Phone Number _____

3. Intermediary Bank Information (If Applicable)

Final Beneficiary Name _____ Intermediary Account or Reference Number _____

Intermediary Bank Name _____ Intermediary Bank 9 Digit Routing Number of ABA _____

Intermediary Bank Address _____ Intermediary Bank Phone Number _____

4. Acknowledgement and Signature

By signing the form below, I authorize Nelnet Bank ("Bank") to withdraw funds from the above named account and process the outgoing wire as directed in the above instructions. I understand and agree that I am responsible for the accuracy of the above information and that I will be responsible for any loss caused by any inaccuracy of the information provided by me. I further agree I have read and understood the terms of the Wire Transfer Agreement and agree to be bound by such terms. I authorize the Bank to send the funds by any funds transfer payment system or intermediary bank at its discretion. I understand that there is a \$15.00 fee associated with each outgoing wire and that the funds will be withdrawn from my account specified above when the wire is sent. I understand and agree that the Bank shall only be responsible for completing the transfer of funds in accordance with the above instructions. I am aware that, notwithstanding knowledge of any inconsistency, the Bank and subsequent parties to the wire transfer request may act solely based on the financial institution's or beneficiary's account number even if the name and number do not match. I understand once the Bank transmits a wire transfer, it cannot not be canceled or amended. The Bank, in its sole discretion, may attempt to cancel or amend the outgoing wire transfer request, but will have no liability if the cancellation or amendment is not fulfilled. I further understand that if the wire transfer request is cancelled, the Bank will not credit funds until the Bank confirms the beneficiary has not received the funds, and any funds transmitted have been returned. Any credit may not be equal to original amount due to wire fees and expenses of the Bank or other institutions. The Bank has no obligation to re-execute any rejected or returned wire transfer request. In addition, the Bank will have no obligation to pay interest on any cancelled, returned, or rejected wire transfer request.

I hereby certify that the information provided on this Outgoing Wire Transfer Request Form is true and correct and by providing my signature, I am authorizing this outgoing wire transfer.

Signature: _____ **Date:** _____

Print Name: _____ **Phone:** _____