



Valley Bank of Nevada
TRADITION WITH VISION

OUTGOING WIRE TRANSFER

Date: _____

Amount: _____

ABA/Routing Number: _____

Bank Name: _____

Credit To: _____

Recipient's Address: _____

Recipient's City/State/Zip: _____

Account Number: _____

Further Credit To: _____

By Order Of: _____

Funding From Account #: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

Authorized Signature: _____

Bank Use Only
Input By / Time:
Verified By / Time: