REQUEST FOR INTERNATIONAL WIRE TRANSFER AND FOREIGN DRAFTS

Requester	Email:	Pnone:	
	Paye	e Information	
Name		Tax ID	
Charact Addances			
City/State	Country	Postal Code	_
Email			_
Payee Type Choose an iter	n.		
	Financial Ins	stitution Information	
Name of Financial Institution	on		-
Name on Account			
Bank Account Number		Type of Identifier	
Financial Institution Addres	S	(IBAN/SWIFT/BIC/Routing	etc.)
		ance Information	
Currency		Due Date	
Amount		Payment MethodWire D	raft
Purpose of Payment			
	Intermediary Financial Ins	titution Information (If Applicable)	
Name of Financial Institutio	n		
			-
Bank Account Number		Type of Identifier	
Financial Institution Addres	S	(IBAN/SWIFT/BIC/Routing o	etc.)
	Departi	mental Approvals	
Business Manager	Date	PI	Date
System Accounts Payable Verification			
Vendor Website		Information verified by:	
	ON FOR REPARTMENTS	DIFACE BEAD!	

IMPORTANT INFORMATION FOR DEPARTMENTS: PLEASE READ!

Departments are responsible for verifying the accuracy of the information above. Wire instructions should be obtained from the individual personally, or a trusted contact with the vendor. If payments are posted to a fraudulent account based on the information supplied on this form, the department will be liable for all losses.