



Wire Transfer Request

Department name: _____
 Department phone: _____
 Person requesting transfer: _____
 Department Approval: _____
 Reason for payment: _____

Amount: _____ (US dollars only; must be converted if necessary)
 Index Code: _____
 Account Code: _____
 Activity Code: _____
 Payee Name: _____
 Payee Address: _____

Bank information

Recipient Bank Name: _____
 Recipient Bank City/State: _____
 Beneficiary Account # _____
 Beneficiary Account name: _____
 Beneficiary Address: _____

For Domestic wires

Recipient Bank ABA #(routing #-9 digits): _____

For international wires transfers please include

please note there is a wire fee of \$13 for international wires

SWIFT Code: _____
 CLABE(Mexico only): _____
 IBAN(Europe only): _____

OBI(Originator to Beneficiary Information to be included-140 char limit):

Attach copy of invoice, receipt, or other supporting documentation.