

# WIRE TRANSFER FORM - DOMESTIC

(payee bank account in US)

Instructions:

1. Complete information below or attach information provided on payee bank letterhead.
2. Attach this form to the payment request form being submitted (Check Requisition, Non-Employee Payment for Services, etc).
3. Do not email this information. Attach hard copy to form being submitted.
4. Contact Accounts Payable at 631-8274 for assistance.

**BENEFICIARY BANK (payee's bank):**

Bank Name \_\_\_\_\_

Bank City & State \_\_\_\_\_

ABA / Routing # (9 digits) \_\_\_\_\_

Payee's Name on Bank Account \_\_\_\_\_

Bank Account Number \_\_\_\_\_

**INTERMEDIARY BANK (if applicable):**

Bank Name \_\_\_\_\_

Bank City & State \_\_\_\_\_

ABA / Routing # (9 digits) \_\_\_\_\_

Submitted by \_\_\_\_\_ Phone # \_\_\_\_\_  
(Print name)