



Outgoing Wire Transfer Form

Wire Transfer Information	
Beneficiary Name:	
Beneficiary Address:	
Beneficiary City:	
Beneficiary Postal Code:	
Beneficiary Country:	
Beneficiary Account Number: Cuenta Clabe (Mexico)	
Beneficiary Bank ID:	
Amount:	
Student Name: Student ID Number:	

FOR OFFICE USE ONLY

Authorized by: _____ Wire Date/Time: _____
Comptroller/Assistant Comptroller/Financial Analyst

Sequence #: _____

Account(s) to charge: _____

Vendor Name: _____ Invoice Date: _____

Transfer Initiator: _____ A/P to Process Journal Entry

Invoice #: _____ Check #: _____ Processed by: _____ Date: _____

PO #: _____ Banner Bank Code: 06 (unless initiator specifies otherwise): _____