



## 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:	

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**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): \_\_\_\_\_