

Southern Methodist University

Wire Transfer Form

Request date: Transmittal Date:

Department: Phone #:

Bank Name:

Complete Bank Address:
(include country if international)

Beneficiary / Payee's Account Name:

Complete Beneficiary's Address:

Bank Account Number:

Bank Wire ABA Routing Number (not ACH Routing) :

Bank Account Number, IBAN:
(if the country requires it), or CLABE Number (Mexico)

Bank SWIFT/BIC Code or IRC:
(International Routing Code, if applicable)

Bank Name:

Complete Bank Address:

Bank Wire ABA Routing Number
or SWIFT Code (not ACH Routing) :

For Further Credit To (if applicable) :

Additional Bank Information:

Purpose of the Wire:

Wire Amount: Currency:

Please attach original documentation, invoices, payment request form & bank information.

Requestor:
Printed Name Signature Date

Approved by:
Printed Name Signature Date

Approved by:
Printed Name Signature Date