

You requested that payment to you be made by electronic funds transfer (bank wire transfer). In order to properly credit your bank account, please provide the following information, legibly.

\* Required Fields

* Bank Name:	
* Bank Address:	
ABA Routing # (US Banks):	
* SWIFT Code and/or BIC:	
* IBAN	
* Account Name (Not Payee Name):	
Account Holder's Address:	
* Account Number	
Additional Information	

**Important**

Please inquire from your foreign bank (bank outside the United States) if they need to go through a correspondent bank in order to receive a wire transfer from a US Bank. If this is true, then please obtain the following required information regarding your bank's correspondent bank.

**For US\$ transfers to foreign bank via it's correspondent bank:**

Correspondent Bank's Name:	
Correspondent Bank's Address:	
SWIFT Code and/or BIC:	
IBAN	
Account #	

By my signature below, I confirm that I am the (title) \_\_\_\_\_ of (entity)

\_\_\_\_\_ and as such I have been authorized to provide the information above. I understand that the University may seek confirmation of my authority in writing or by phone.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_