

Wire Payment Form
(Attach invoice or contract agreement)

Date: _____

Vendor's Name: _____

V-Number: _____

Address: _____

Description of Service:

Date of Service _____

Please include wire information below:

Beneficiary name _____ *Beneficiary Acct #* _____

Street Address _____

City _____ *State* ___ *Country* _____ *Zip code* _____

Beneficiary Bank _____ *ABA/SWIFT #* _____

Street Address (if applicable) _____

City _____ *State* ___ *Country* _____ *Zip code* _____

Additional Instructions _____

*Please process payment prior to event and send **wire confirmation** to*
_____ *at Mail Code* _____.

Charge to Index _____ ***Account*** _____.

Budget Manager Signature (required) _____

Amount Due: \$ _____ (US Dollars)

<p>Date Service Completed _____ I certify that a Contract Agreement has been completed and amount due is approved for payment. Signature _____ Date _____</p>
