

**UNIVERSITY OF ALASKA
DOMESTIC WIRE REQUEST FORM**

UA AUTHORIZATION:

*Requested by: _____ *Date: _____

Note: Requester must sign and be different than authorized signer. *Requester phone #: _____

*Authorized by : _____ *Date: _____

*Authorized Signer call back phone#: _____

TRANSACTION INFORMATION:

*USD amount _____ *Transfer date: _____

BENEFICIARY/VENDOR INFORMATION:

*Vendor/Payee Name: _____

*LAST 4 Digits of Vendor/Payee Account #: _____

Has acct # changed for this vendor? Circle one: Yes/No If yes, has the new acct# been verbally verified with the vendor? Circle one: Yes/No Initials of Auth signer: _____

*US Receiving Bank Name: _____

*ABA/Routing #: _____

Reference #: _____

Additional Info & Reason: _____

*Banner fund & org # wire transfer fee _____

FURTHER CREDIT (*Required to further credit another financial institution, i.e. credit union small bank – final destination*):

Vendor/Beneficiary Bank _____ ABA/Routing #: _____

Bank Address: _____

CASH MANAGEMENT USE ONLY

*Verified/Approved by: _____ Date: _____

From Bank Account #: _____ JV#: _____

*U.S. Department of the Treasury OFAC verified (Both SDN list and Sanctioned Countries must be checked):

<http://www.treas.gov/> Initials: _____

NO ELECTRONIC SIGNATURES ARE ALLOWED SUCH AS DOCUSIGN. THIS DOCUMENT CONTAINS PII AND CONFIDENTIAL BANKING INFO. IN ORDER FOR FUNDS TO BE SENT, AUTHORIZED SIGNER MUST APPROVE AND SUBMIT THIS REQUEST VIA EMAIL TO UA-CASH@ALASKA.EDU.

*Indicates required Field