University of Oregon Request for Wire Transfer - Non-Recurring

Check one:	Domestic Wire	or	International Wire
UO Wire Number:		Forward Cont	ract #: – if applicable)
Date Transfer to Occur:		(101 11111) 110	
Amount of Transfer:		Currency (if o	ther than U.S.)
Beneficiary Vendor Number			
Beneficiary: (35 spaces available)			
Beneficiary Account # or IBAN #			
Beneficiary Street Address: (35 spaces available)			
Beneficiary City/State/Country: (35 spaces available)			
Beneficiary Bank Name: (35 spaces available)			
Beneficiary Bank ABA Routing #: (Domestic) or Swift # if (foreign)			
Beneficiary Bank Street Address: (35 spaces available)			
Beneficiary Bank City/State/Country:(35 spaces available)			
Message for Beneficiary: (105 spaces available)			
Email address of Beneficiary:			
Department Signature:			Date
Agency Authorized Initiator's Signature*:			Date:
Agency Authorized Releaser's Signature*:			Date:
Any wire transfer request received after Accounts Payable requires 24-hour notic			=
For Department Use: Department Name:			
Index or Fund/Org/Program:			Account Code:
Banner Document Number:			
For Business Affairs Office Use Only	:		
Currency Conversion (if applicable) U.S \$:	US I	Bank Control Number: