

Domestic Wire Transfer Form

Payee: _____ Payee ID Number: _____

1099 Reportable (Yes/No): _____ Income Type: _____

Description of Services: _____

Bank Name: _____

Name on Account (Beneficiary): _____

Account Number: _____

Routing/Transit Number: _____

Reference for Beneficiary: _____

Amount: _____

FUND	ORGN	ACCT	PROG	ACTV

Authorizing Signatures:

Budget Manager/Department Head – Print Name: _____

Budget Manager/Department Head – Signature: _____

Date: _____

Approved by Procurement & Contracts

Date