University of California Santa Barbara, Business & Financial Services, Accounts Payable, MAIL CODE 2040

Wire / Draft Information & Authorization Form

RECOMMENDATION: If not already provided, request payee obtain bank's printed version of payee's Account/ Routing information and attach it to this form.

U5-8WD (10-2012)

FOREIGN CURRENCY TO BE USED	FOREIGN AMOUNT	**- OR - < whichever > is known**	US DOLLAR AMOUNT
VENDOR/PAYEE NAME			
Submit with approved, original invoice or Payment Request. This form is not a substitute for regular documentation.	LV SB VB KK etc.	INVOICE NUMBER	INVOICE DATE

Loc	Account	Fund	Sub	Obj Code	Cost Center	Cost Type	Project Code	AMOUNT	
				7227				7.50	FEE

SELECT PREFERRED WIRE/DRAFT TYPE: BANK FEES

( ) US Dollar domestic/international wire (provide banking information below) $18.00 / $9.50

(✔) Foreign currency wire (provide banking information below) $7.50

( ) Foreign currency draft (no banking information needed) $10.00

The actual foreign exchange rate is determined at the time the transaction is processed by the bank.
Returns, reissues and associated foreign exchange rate fluctuations may result in subsequent additional charges

VENDOR/PAYEE BANKING INFORMATION: ***(required for all wires)***

Payee Bank Account Number: ______________________________

(Foreign Wires: Europe & UK = IBAN, Mexico = CLABE, Australia = BSB and Acct, etc.)

Payee Name as on Bank Account: ______________________________

Payee Address linked to Account: ______________________________

Domestic Wire: Bank's ABA Fedwire Routing #: ______________________________

Foreign Wires: Bank's SWIFT or BIC Code: ______________________________

Bank Name: ______________________________

Bank Address: ______________________________

Intermediary Bank Information, if required: ______________________________

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ADDITIONAL WIRE/DRAFT AUTHORIZATION APPROVED BY

I agree that circumstances justify incurring the above bank fees and possible additional return/reissues charges (two different authorizing signatures are required: this one, as well as the one on invoice or Form-5).

Authorized approver other than invoice/payment approver ____________ Title ____________ Date ____________

DEPARTMENT CONTACT

Prepared by ____________ Extension ____________ Department ____________

Submit this signed original to Accounting. No additional copies required by Accounting.

NOTE: In the transaction summaries of the Data Warehouse EZ Access—Accounts Payable queries, the Bank Fee will show as the amount paid to the vendor. Open "Detail" to see all the distribution lines of the transaction.