



THE UNIVERSITY OF CHICAGO

Office of the Comptroller

1225 East 60th Street

Chicago, Illinois 60637

INTERNATIONAL
WIRE TRANSFER REQUEST FORM

Non-Repetitive Electronic Transfer

(Check this box for one-time payments)

Repetitive Electronic Transfer

(Check this box for transactions that will occur more than once a year)

Document Control Number (DPV, PO, APV or TEV number)	
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Payment Due Date	
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*The beneficiary (payee) must provide, in writing on company letterhead or in an e-mail, all required receiving bank information listed below. Note: Either a U.S. Dollar amount **OR** a Foreign Currency amount and type must be specified.*

(*Indicates a required field)

Beneficiary's Receiving Bank Information

*Receiving Bank Name:			
*Receiving Bank Address:			
*Bank City, State, Zip:			
*Country/Province:		*SWIFT code: (8-11 Alpha Numeric)	
*Account Name:			
SORT CODE (6 digit code required for payments to Ireland, United Kingdom, & Malta)			
*Account Number:			
* U.S. Dollar Amount <i>or</i> ▶		* Foreign Currency Amount	
		*Foreign Currency Type (Do not abbreviate)	
Special Instructions or Comments:			

Comptrollers Office Use Only

NSD Initiator: _____
Signature *Print Name* *Date*

Comptroller's Office Approvals:	Approver 1: <i>Signature:</i> _____ <i>Date</i> _____
	Approver 2: <i>Signature:</i> _____ <i>Date</i> _____