



**THE UNIVERSITY OF CHICAGO**

**Financial Services**

6054 S. Drexel Ave Suite 400

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)

<b>Document Control Number</b> (DPV, PO, APV or TEV number)	
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<b>Payment Due Date</b>	
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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**

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

**Financial Services Office Use Only**

**PPS Initiator:** \_\_\_\_\_  
*Signature* *Print Name* *Date*

<b>Financial Services Approvals:</b>	<b>Approver 1:</b> <i>Signature:</i> _____ <i>Date</i> _____
	<b>Approver 2:</b> <i>Signature:</i> _____ <i>Date</i> _____

