

## Wire Transfer Form

E-mail Completed Form to:

vendor.services@ttu.edu

PO#

Individual or Business Name:				
Vendor EIN or SSN (if applicable):	Banner Number (R#):			
Beneficiary Information *All beneficiary information below is required per Office	ce of Foreign Assets Contr	ol, U.S. Dept. of Treasury*		
Name on account (no initials)				
Local Address (Street/Building Address)				
City	Postal Code			
State/Providence/Territory	Country	Country		
Local phone number	Email add	Email address		
Additional Wire Information/Reference Details				
Beneficiary Bank				
Account/IBAN/CLABE Number				
Type of currency account can receive All wires will be sent in local currency unless noted as US Dollar account	Local Currency	US Dollar		
Bank Name				
SWIFT/BIC Code				
Country Specific Clear Code				
Intermediary/Clearing Bank An intermediary hank is required if the wire is to be sent in US Dolla	ars. Some banks may require an i	intermediary bank to process wires due to their transactional	capabilities	
Bank Name	SWIFT/BIC Code			
Additional intermediary information				
Under penalties of perjury, I declare that I have examined the informe	ation on this form and to the best	of my knowledge and belief it is true, correct, and complete. I	f	

further certify under penalties of perjury that:

- The entity or individual in this form is the beneficial owner of all the income to which this form relates.
- The entity or individual identified in this form is not a U.S. person.
- The income to which this form relates is: (a) not effectively connected with the conduct of a trade or business in the United States, (b) effectively connected but is not subject to tax under an income tax treaty, or (c) the partner's share of a partnership's effectively connected income.
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person.

I agree that I will submit a new form within 30 days if any information on this form becomes incorrect.

Date Required Signature