

**Your request for a wire transfer will be submitted based on the information that you provide on this form.**

### INTERNATIONAL ELECTRONIC PAYMENT

To submit an international electronic payment, the request for transfer is presented to the Accounts Payable office via a completed WMU Voucher (the voucher can be obtained from the WMU Web Site: Business and Finance/ Accounting Services/ Accounts Payable/ Generic Voucher) with the respective invoice (if it is a vendor payment) attached plus the information requested below.

**Please be advised that wire transfers going to an international location may be charged a fee by the intermediary bank.**

Please note, payments submitted via electronic transfer are done as **exceptions**. The University's preferred payment method is the Procurement Card, or a check issued through the Accounts Payable office.

Provide the following information to the Accounts Payable office:

- A completed WMU Voucher
- The respective invoice (if it is a vendor payment)
- A completed International Electronic Payment form

➤ **Payment Information**

- **Amount to be transferred:** \_\_\_\_\_ (identify currency) \_\_\_\_\_
- **Transfer to be issued in** \_\_\_\_\_ currency (example – British Pounds; Yen; Euro; U.S. Dollars)

It is important the payor/department specify the currency required for issuance of the payment. If the payment is to be issued in a foreign currency, we will notify you of the exchange rate once the transaction has been completed. For all European transfers use the IBAN in combination with the BIC to assure payment.

➤ **Beneficiary Information**

- **Bank Name:** \_\_\_\_\_
- **ABA /Routing Number** (if there is a U.S. affiliate bank): \_\_\_\_\_
- **Bank Address** (Street Name and Number, City, Country): \_\_\_\_\_  
\_\_\_\_\_
- **Sort Code:** \_\_\_\_\_
- **BIC (Bank Identifier Code)** (aka: Swift address): \_\_\_\_\_
- **IBAN Number** (for European Union transfers): \_\_\_\_\_
- **CLABE Number** (for transfers to Mexico – 18 digit): \_\_\_\_\_
- **Beneficiary/Recipient Account Name:** \_\_\_\_\_
- **Beneficiary/Recipient Bank Account Number:** \_\_\_\_\_
- **Reference Information** (any additional information for the receiving bank or beneficiary - i.e., invoice number, reason for payment, etc.): \_\_\_\_\_

Please sign and date this request: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Please contact Jennifer Halseth Jennifer.halseth@wmich.edu (269-387-2154) if you have questions.

**ACCOUNTS PAYABLE APPROVAL** \_\_\_\_\_