Please do not send any Personally Identifiable Information (PII), such as SSNs, ITINs, bank account numbers, tax documents, W2s, etc. via email.

Email is not considered a secure method of communication.

To convey data of this sort, please use: secure upload https://upload.clarku.edu/form/accountspayable , fax (508-793-7500), interoffice mail or mail.

## **CLARK UNIVERSITY - TD BANK INTERNATIONAL WIRE TRANSFER REQUEST**

All wires require clear instructions. Attach all supporting documentation for disbursement of funds to requisition (i.e. Invoices, PO, receipts, printed banking information from the bank, etc.)

Section I - Prepared by Requesting Department							Date requested to pr	ocess wire (required)		
Amount (required)			Currency Type (required)			<u>Sender's</u> <u>reference</u>				
	Heddired						•			
Details of Payment										
<u>Details of Payment</u>										
<u>Beneficia</u>	ary Bank Acc	ount Numbe (required)	r OR IBAN N	<u>lumber</u>						
<u>Benefi</u>	ciary	Nar	me							
Name and		Address								
<u>(requi</u>	red)	Address								
	Country/		ry/Zip							
* IBAN is required to complete European international wire.  Beneficiary's physical address is required for all wires (PO Box not										
	<u>S</u>	SWIFT Code:								
		Name								
<u>Ban</u>		Addiess								
Name and (requi		Addross								
		Counti	ry/Zip							
FOAPAL to be charged for expense. Do not fill if FOAPAL information is in SBP.										
FUN	ND I	OR	G	ACCT		PROG	ACT	LOC	AMT	
Callback verification of bank information completed by: Date: Contact name and #: *  Required for all new Vendors or changes to Vendor and/or bank information on file.										
Section II -	- Approva	ıls								
								Date:		
Department Approval:							Date:			
AUTHORIZATION wire over \$10,000										
1st Authorization Date:										
1st Authorization  Controller or Associate Controller Approval								Date:	<del></del>	
AUTHORIZATIO	ON wire over			••						
2nd Authorization Date:										
Section III	- Financia		-		or the	tollowing officers. Fresi	dent, chief Budget Office	er, controller of Associat	e controller	
			-		act num	ber and exchange rate.				
Contract # Rate										
eTreasury - E	ntered by:_					SEQ#:_		Date:		
eTreasury - Approved and Released by:								Date:		
Section IV	- Accoun	ts Payable		Entered in Bann	ner by					
Invoid	ce#					Date				
Misc Notes:										

Date - Enter the requested date for the wire to be released from the bank. Please note that foreign wires could take up to 2 weeks to reach it's destination. **Amount** - Enter the amount of the wire. Sender's Reference - How Clark identifies the transaction, such as, invoice or purchase order number. If this is a direct pay, accounts payable will enter the 3 reference later. Maximum of 16 characters and spaces. Details or Purpose of wire - Please include information such as: Beneficiary's Invoice Number, Purchase Order number, any remittance information that the beneficiary or the beneficiary's bank will find helpful when identifying the wire. Please do not include names. Maximum of 35 characters and spaces per line. Beneficiary Bank Account Number - Bank account number for the beneficiary. Printed supporting documentation from recipient is requested. Beneficiary Name and Address - Accuracy is important. Please note: Descriptions are limited to 35 characters and spaces per line for a maximum of 4 lines. Physical address is required. Neither PO Box nor In Care Of (I/O) are allowed. If there is any concern, please contact the beneficiary. If the name is more than 35 characters and spaces, put as much as you can on this line and then put the complete name on the first 2 lines of the Details of Wire. Printed supporting documentation from recipient is requested. Bank ABA wire routing number - This is the recipient's bank's ABA WIRE routing number. In this case, the routing number for a wire may not be the same as the routing number for a checking account. Please have vendor verify with bank. Accuracy is important. Printed supporting documentation from recipient is Bank Name and Bank Address - Accuracy is important. Please note: Descriptions are limited to 35 characters and spaces per line for a maximum of 4 lines. If there is any concern, please contact the beneficiary. Callback verification: Per Clark's Expense and Payments Approval Policy, payment details for new vendors or any changes to vendor information such as address or bank information must be verified via a call to the original phone number on file or in person. Email verification is not acceptable. Person verifying must stamp In Section II - Approvals- Sign and date on the "Submitted by" line. Wires \$5,000.00 - \$10,000.00 require Department approval. Wires \$10,000.01 - \$25,000.00 10 require Department approval and Controller or Associate Controller approval. Wires over \$25,000.00 require Department Approval and CFO approval or dual approval by any two of the following officers: President, Chief Budget Officer, Controller or Associate Controller. 11 Submit the approved form to Financial Services - Accounts Payable for processing. Notes: Please make us aware of any special wiring instructions. Also, any wiring instructions in printed format from the vendor is appreciated. Wires

over \$10,000 need to have banking information from their bank.