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| NU Logo |  |

**WIRE TRANSFER REQUEST FORM**

Select Bank: Choose an item.

⬜ **Non**-**Repetitive Electronic Transfers**  ⬜ **Repetitive Electronic Transfer**

 (Check this box for one-time payments) (Check this box for transactions that

 will occur more than once a year)

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| *Payment Due Date*Date required by outside party | Click or tap to enter a date. |  | ***Value Date***If different than Payment Date | Click or tap to enter a date. |

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| The Requestor must provide, in writing (e-mail acceptable), all required receiving bank information listed below. **(*\** Indicates a required field)** |
| Beneficiary’s Receiving Bank Information |
| ***\*Beneficiary Bank Name:*** |  |
|  ***Beneficiary Bank Address:*** |         |
| ***\*Bank City, State:*** |        |
| ***\*Country (if not USA):*** |        |
| ***\*ABA Routing Number (if US Bank) (9 digits)*** |  |
|  ***SWIFT Code (\*Required if not US Bank) (8-11 alpha-numeric)*** |  |
| \*Account Name: |        |
| ***\*Account Number:*** |              |
| ***U.S. or FX Amount:*** |        |
| ***Special Instructions or Comments:*** |        |
| ***Requested By*:**  ***Signature Print Name Date*** |
| ***Approved By:*** | Signature/Initials Date |
| ***For Use by Accounting:*** | Debit Index: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Debit Account Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Credit Index: BANK01\_\_\_\_\_\_\_\_ Credit Account Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |