UNIVERSITY *of* WISCONSIN
LA CROSSE

Wire Transfer Request

This form is used to request a wire transfer of funds to a vendor for an invoice or obligation.

Banking routing information **must** be provided by the vendor via the following options:
1) Identified on the invoice from the vendor.
2) An email message directly from the vendor.

Accompanying this form **must** be an invoice and/or other legitimate documentation supporting the disbursement.

The original form and supporting documentation should be forwarded to Business Services located at 125 Graff Main Hall or can be scanned and emailed to: accountspayable@uwlax.edu

Questions regarding the use of the form should be directed to the Accounts Payable Manager at 608-785-8555.

Contact Name:_____ Date: _____

Supplier Name:_____

Payment Request Amount & Currency Type (USD, CAN, EUR, etc.):_____

WISDM Department Name:_____

WISDM Account to Charge (XXX-X-XXXXXX): _____

WISDM Account Manager (Print): _____

WISDM Account Manager (Signature): _____

Checklist

☐ Invoice or Email from the Vendor with Bank Routing Information

☐ Documentation Supporting the Disbursement – Invoice & Purchase Order, Contract, etc.

☐ WISDM Account Information and WISDM Account Manager Signature (See Above)

Business Services Use only

Controller / AP Manager:_____

Date: _____

Last Revised 01/31/19