

ACH/ Wire Transfer Request

University Hall
1 LMU Drive, Suite 2200
Los Angeles, CA 90045-2659
Phone: (310) 338-2714
Fax: (310) 338-7550

Payee Details (all payee details are required)

Name on bank account _____

Address _____

City _____

State _____

Zip _____

Country _____

Date _____

Amount (USD) _____

Amount (non USD) _____

Currency (non USD) _____

Details of Payment for G/L _____

Details of Payment for Wire _____

Departmental Approval

G/L Account to Charge _____

Requested by (please print) _____

Signature _____

Approved by (please print) _____

Signature _____

Domestic ACH

Domestic Wire

ABA Number _____

Bank Name _____

Account # _____

International Wire

SWIFT Code _____

Bank Name _____

IBAN/ ACCT# _____

CLABE (Mexico) _____

Accounts Payable Use Only

Initiated By _____

Reference # _____

Released by _____

Document # _____

Oracle Entry by _____

Date _____

Controller's Office Internal Approval

\$5,000 and over - First Authorized Signer

\$25,000 and over - Second Authorized Signer