

Mandatory Wire Payment Instruction Authentication

New Vendor: AN
Yes No
If Yes, Wire Payment Instructions

By Phone

Verified by

In Person

AND Existing Vendor Requesting Wire Payment Instruction Change:

Yes No

If Yes, Wire Payment Instructions Verified by

In Person By Phone

PR/NR/P.O #	
Tax withheld % (for AP use only)	

Harvard University Wire Transfer Authorization Form – US Currency

Value Date:	Amount:	
Beneficiary Bank Information		
Bank Name:		
Bank Address:		
ABA# (domestic wires only):		
Swift Code/BIC Code (international wires only):		
Beneficiary Account Name:		
(Beneficiary account name must match vendor name)		
Beneficiary Bank Account Number or IBAN number:		
Sort Code (6 digits): (if applicable)		
Payment Details:		
*USD Wires must be minimum \$1000 and sent internationally, no domestic wires allowed		
Intermediary/Corresponding Bank (Only if applicable)		
Bank Name:		
Bank Address:		
ABA#:		
Bank Account Number:		
Reference:		
Department Requestor and Approver		
Name of Requestor:	Date:	
Telephone #:		
Authorized Signature:	Date:	
Office of Treasury Manag	gement Use Only	
Wire Initiated By:	Date:	
Wire Released By:	Date:	
Bank Reference #:		

Staple this form to the front of each invoice:

SEND TO:

CASH MANAGEMENT - OFFICE OF TREASURY MANAGEMENT 1033 Massachusetts Avenue, 2nd Floor, Tel. 617-496-3018