

## Colorado College Wire Transfer Request

Date				Date Require	ed	
Department						
Requested by				Phone #		
Dept. Chair Approval			_			
Purpose			_			
. u.pose						
WIR	INSTRUCTIONS -	. Please compl	lete all hoves			
Domestic	International		Intermedi		1	
	Attach documer	ntation for Bar	nk and Account	Informatio	n	
Bank Name						
Bank Routing Number or Swift Code						
Account Holder's Name						
Account Number or IBAN						
CURRENCY TYPE			AMOUNT (in currency selected	)		
Country			City			
FUND	ORGANIZATION	ACCOUNT	ACTIVITY CODE	LOCATION CODE	\$	
			<u> </u>			
			WIRE FEE	TOTAL	\$	20.50
					<del>-</del>	
Special Instructions					Business Offi Date	ice Approval