



LOUISIANA STATE UNIVERSITY

Louisiana State University  
Office of Accounting Services  
Accounts Payable & Travel  
217 Thomas Boyd Hall

**WIRE TRANSFER REQUEST**

**AS493**

*(Domestic or International)*

Request Date \_\_\_\_\_

Payment Type  ACH  Wire  
Type of Wire  Domestic  International

Beneficiary Name \_\_\_\_\_

Amount \_\_\_\_\_

**For a Domestic Wire:**

Bank Name	
Bank Routing Code	
Account #	
State	Zip

**For an International Wire (Beneficiary Bank):**

Bank Name	
Swift Code/BIC	
Account #	
IBAN #	
Province	Country

**Intermediary Bank:**

Bank Name
Swift Code/ABA

Special Instructions \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested by: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR ACCOUNTING SERVICES USE ONLY**

**JP Morgan Access**

Supplier Invoice #	
Bank Transaction #	
Date & Time of Wire	
Initiated by	