



## ONE-TIME WIRE REQUEST

Office of the State Treasurer Arizona

1700 W. Washington Street, Suite 102, Phoenix, AZ 85007

Send completed form and wire instructions to [banking@aztreasury.gov](mailto:banking@aztreasury.gov)

(Type or print information)

### Agency and Requestor Information:

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

Agency Name: \_\_\_\_\_

Requestor Name: \_\_\_\_\_

Requestor Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### Wire Transfer Information:

Wire Type: \_\_\_\_\_

Amount of Wire: \_\_\_\_\_ Currency: \_\_\_\_\_

Effective Date of Wire: \_\_\_\_\_

Wire Addendum: \_\_\_\_\_

AFIS Document Type: \_\_\_\_\_ AFIS Document ID: \_\_\_\_\_

### Beneficiary Financial Institution Information

Financial Institution ID: \_\_\_\_\_ ID: \_\_\_\_\_

Financial Institution Name: \_\_\_\_\_

### Beneficiary Information:

Beneficiary Full Name: \_\_\_\_\_

Beneficiary Account Number: \_\_\_\_\_

Beneficiary Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Country: \_\_\_\_\_

### Additional Information:

### Certification:

I certify that the Beneficiary on this request is the Vendor of the corresponding AFIS document. I certify the information on this request was received by authorized personnel of that of the Beneficiary. I understand that the Treasurer's Office relies upon this certification as a material representation.

Signature of Authorized Signer: \_\_\_\_\_

Full Name of Authorized Signer: \_\_\_\_\_

Title of Authorized Signer: \_\_\_\_\_

### Treasurer's Office Use Only

(Required if wire transfer is in foreign currency)

Bank Settled Amount in US Dollars: \_\_\_\_\_ Date: \_\_\_\_\_

AFIS Document ID: \_\_\_\_\_

Processed by: \_\_\_\_\_