

REPETITIVE WIRE REQUEST

Office of the State Treasurer Arizona
1700 W. Washington Street, Suite 102, Phoenix, AZ 85007
Send **completed form** to banking@aztreasury.gov
(Type or print information)

Agency and Requestor Inform	mation:	Date:
Agency Name:		
Requestor Name:		
=		
Daguagter Email.		
Wire Transfer Information:		
Repetitive Wire ID:		
Amount of Wire:		Currency:
ECC ', D' CM.		
Wire Addandum		
AZ360 Transaction Code:		AZ360 Transaction ID:
Beneficiary Information:		
Beneficiary Full Name:	_	
Additional Information:		
Certification:		
•	-	ndor of the corresponding AZ360 document.
	-	by authorized personnel of that of the Beneficiary.
I understand that the Treasurer's	s Office relies upon th	is certification as a material representation.
Signature of Authorized Signe	owe	
e e		
Full Name of Authorized Sign	er:	·
Title of Authorized Signer:		
	Treasurer's Off (Required if wire transfer	
Bank Settled Amount in US D	Oollars:	Date:
AZ360 Transaction ID:		
Processed by:		