



**INTERNATIONAL WIRE TRANSFER FORM FOR
INDEPENDENT CONTRACTOR PAYMENTS**

CSUSM

CORP

Foundation

REQUESTOR INFORMATION

Requestor's Name

Extension

Department

Date

Purchase Description

Amount
Note:
USD Only

BANK INFORMATION

Enter Bank ID and Bank Country

Bank ID/SWIFT

Bank Country

VENDOR INFORMATION

Enter Account Name, Account Number and Address.

Beneficiary/Vendor
Account Name

Account Number

Address

CLABE (Mexico Only)

BANK INFORMATION

Enter Bank Name, IBAN and Address.

Bank Name

Int'l Routing Code
(ES + 8 Digits)

Address

Int'l Bank
Account/IBAN

Note:

I understand that California State University San Marcos (CSUSM) requires ten (10) business days to set up this initial authorization and two (2) business days for funds to become available following a wire transfer.

Please attach this form to the front of the approved original invoice which has the appropriate chartfield string. The department has determined and verified who will be responsible for all possible related wire transfer fees.

Department Signature

Date

Please email the completed form and backup to: accountspayable@csusm.edu.