

WIRE/DRAFT TO FOREIGN COUNTRIES FORM

INSTRUCTIONS:

- 1. Refer to the Standard Operating Procedure Request for Wire located on the Finance website
- 2. Do not use this form for payments to Canada or the United States; use a cheque requisition instead. In exceptional circumstances, please contact Manager, General Accounting.
- 3. Forward the completed form to Accounts Payable, Finance Department. DO NOT PRINT DOUBLE SIDED.

IMPORTANT - PLEASE READ:

- Foreign exchange (FX) rates fluctuate on a daily basis and are subject to additional fees/commissions by the FX provider. Rates obtained from internet sites (e.g. <u>OANDA</u>) serve only as a guide. The actual FX rate will differ from rates obtained from other sources and are determined by the FX provider when the wire/draft order is committed.
 - **Tip:** Where amounts owed are subject to a Canadian dollar maximum (e.g. contributions to travel costs, refunds, etc.), please specify the amount in section A in Canadian dollars.
- 2. If the amount specified in section A is denominated <u>in a currency other than Canadian dollars</u>, the same currency must be specified in section B.
- Please ensure the payee obtains/verifies the required details provided on this form with their financial institution before submitting the form. <u>IF THE BANKING INFORMATION PROVIDED IS INCORRECT, AND FUNDS ARE MISTAKENLY</u> ROUTED TO A THIRD PARTY, IT IS VIRTUALLY IMPOSSIBLE TO RECOVER THE FUNDS.
- 4. The submitting department is responsible for confirming (in writing) with the payee which currency they prefer to receive. The payee's bank account must be denominated in the currency specified in section B, otherwise the amount paid will be subject to conversion by the payee's financial institution at unfavourable FX rates. Vendor invoice payments will only be issued in the currency stated on the invoice.
- 5. External banking fees apply to wires and drafts. All fees are chargeable to the requestor's cost centre. Additional fees may be charged to the payee by the payee's financial institution to process the receipt of this payment.
- 6. Payments may be subject to HST self-assessment, which is chargeable to the requestor's cost centre.
- 7. Where employment or other services were provided in Canada, Canadian income taxes may apply. If applicable, income taxes will be deducted from the payment and remitted to Canada Revenue Agency on behalf of the payee.

COMMON CURRENCY CODES & REQUIRED BANKING DETAILS (in addition to the account number):

COUNTRY	CURRENCY CODE:	REQUIRED DETAILS:
CANADA ***	CAD	Bank ID (4 digits), Transit # (5 digit) ***
UNITED STATES ***	USD	ABA ***
EUROPE	EUR	IBAN, BIC/SWIFT (8-11 digits)
GREAT BRITAIN	GBP	IBAN (22 alpha-numerical digits), BIC/SWIFT (8-11 digits), BACS Sort Code (6 digits)
HONG KONG	HKD	Bank Routing Code (6 digits)
NEW ZEALAND	NZD	Bank Routing Code (6 digits)
AUSTRALIA	AUD	BIC/SWIFT (8 or 11 digits), BSB Code (6 digits, only required if 8 digit SWIFT provided)
INDIA	INR	BIC/SWIFT (8-11 digits), IFSC (11 digits), Purpose of Payment, Type of Account, Relationship to Beneficiary (Payee)
CHINA	CNY	BIC/SWIFT (8-11 digits), Bank Routing Code (CNAPS Code – 12 digits), Beneficiary (Payee) contact name, Payee Address/ Telephone Number, Purpose of Payment
JAPAN	JPY	BIC/SWIFT (8-11 digits)
PHLIPPINES	PHP	BIC/SWIFT (8-11 digits)
SINGAPORE	SGD	BIC/SWIFT (8-11 digits), Bank Routing Code (7 digits)
SWITZERLAND	CHF	BIC/SWIFT (8-11 digits), IBAN (21 alpha-numerical digits)



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Accounts Payable Date Stamp	

Α	WHAT IS THE TOTAL AMOUNT OWED TO PAYEE?							WHAT CURRENCY SHOULD THIS BE PAID IN?							
	Currency	If Other	r (specify) Amount [Required]						Currency		If Other (specify)				
	Select								Select						
C	PAYEE * must be exa the registered	bank	of		r Name/Individ	ual Sur	nam	ne			Individual First Name				
	account holde required)	er (all field			address				Telephone number						
	PAYEE'S				Address – Number, Street, and Apt. No. or P.O. Box #, R.R.										
	MAILING ADI	DRESS		Address – Continuation if required					. /D		1				
		City						nce/Sta	ate/Region	Postal code		Country			
)	INVOICE # / F	PO #							SERVICE IN CANAI	S PERFOR DA?	RMED ☐ YES ☐ NO		□ NO		
	REASON FO	R PAYME	ENT		Describe the	good or	r ser	vice b	eing purchas	sed; attach :	supporti	ng docume	ntation		
		FIELD(S) HARGED)	OPTIO				AL		REBATE			FINANCE		
-	ACCOUNT	FUND		OST ITRE ACTIVITY			TIME L		LOCATION	RATE %			USE		
-															
-	001680				GS	T/HST	reba	ate (as	applicable)						
= -	370700				W	ire / dra	aft fe	es (as	Total applicable)	DR DR					
	001680			HST self-assessment HST rebate						CR NET DR DR					
_	010610				A/P HST			ment (@%	CR					
_	individual.	Prepared by: Please note that preparer and approver cannot be the same condividual.								proved by University Signing Authority: ereby certify that I am authorized to sign on the cost atres above and that all expenditures are valid, in appliance with the policies of the University, and sufficient ds are available to cover this expenditure.					
: [Name (print):						-	Name Signa	e (print):						
ŀ	Signature: Title & Unit:								R Unit:						
	Date: фтюбюй	Ϋ́D							fAA#88#MMML		Tel:				
					FOR FIN	IANCE	/ P/	AYRO	LL USE ON	_Y					
	Payroll	ayroll								FX Order#					
	Accounts Pay	able			General	g]							
L	Research Acc				Mgr. Gen. Accounting										
L	1" Signing Off	1 st Signing Officer 2 nd Signing Officer													



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PAYEE DETAILS & BANKING INFORMATION

			OUNT OWED TO PAYEE?				WHAT CURRENCY SHO				PAID IN?	
Currency	· · · · · · · · · · · · · · · · · · ·		cify) Amount [Required]				Currency			If Other (specify)		
Select						Sel	ect					
PAYEE * must be exact name of the registered bank account holder		of _	Vendor Name/Individual Surname					Individual First Name				
				address	Telephone number							
PAYEE'S MAILING ADDRESS			Address – Number, Street, and Apt. No. or P.O. Box #, R.R.									
			Address – Continuation if required									
			City		Province/State/Region			Postal code		Country		
NOTE THAT BANK ACCOUNT MUST BE REGISTERED TO THE PAYEE LISTED ABOVE												
BANK NAME	[Require	ed]										
			Address – Number, Street, and Apt. No. or P.O. Box #, R.R.									
BANK			Address – Continuation if required									
ADDRESS [Required]			Address – Continuation if required									
			City Province/Si			ate/Re	e/Region Postal code		le	Country		
ACCOUNT #	[Require	d]										
				TAILS (IBAN, SW Payee to obtain in								
Select code t	уре											
Select code t	ype											
Select code t	ype											
Select code t	ype											
Select code t	ype											
Select code type												
OTHER [As needed] Please specify the code type and the							s numk	oer				
CORRESPONDENT BANK NAME DETAILS [If required]			Correspondent bank name, address, account number, etc.									
				FOR I	FINANCE US	E ONL	.Υ					
VENDOR REC	CORD:	□ CR	EATE	□ UPDATE	PAYMENT	TYPE	:	□ EFT		ACH	□ DRAFT	